



CANADA

# House of Commons Debates

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OFFICIAL REPORT  
(HANSARD)

**Thursday, April 23, 1998**

**Speaker: The Honourable Gilbert Parent**

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# HOUSE OF COMMONS

Thursday, April 23, 1998

The House met at 10 a.m.

Prayers

## ROUTINE PROCEEDINGS

• (1000)

[English]

### MULTILATERAL AGREEMENT ON INVESTMENT

**Hon. Sergio Marchi (Minister for International Trade, Lib.):** Mr. Speaker, pursuant to Standing Order 109 it gives me great honour to table in the House of Commons, in both official languages, the government's official response to the report on the multilateral investment agreement, pursuant to the subcommittee on trade, wherein Canada's government agrees with all of the 17 recommendations.

\* \* \*

[Translation]

### GOVERNMENT RESPONSE TO PETITIONS

**Mr. Peter Adams (Parliamentary Secretary to Leader of the Government in the House of Commons, Lib.):** Mr. Speaker, pursuant to Standing Order 36(8), I have the honour to table, in both official languages, the government's response to six petitions.

\* \* \*

• (1005)

[English]

### COMPETITION ACT, 1998

**Mr. Roger Gallaway (Sarnia—Lambton, Lib.)** moved for leave to introduce Bill C-393, an act to amend the Competition Act, 1998 (negative option marketing).

He said: Mr. Speaker, I am pleased to give first reading this morning to this bill which would amend the Competition Act to deal with negative option marketing.

The objective and the thrust of this bill is to prohibit certain financial institutions, including broadcasting and telecommunica-

tions undertakings and companies to which the Insurance Companies Act applies, from charging money to their regular clients for the provision or sale of a new service without the expressed consent of the client.

I would point out that this dovetails with a report released by Industry Canada under the office of the consumer which identifies negative option marketing as being the area in which a number of industries have targeted growth. This is simply intended to protect consumers.

(Motions deemed adopted, bill read the first time and printed)

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## PETITIONS

### MULTILATERAL AGREEMENT ON INVESTMENT

**Mr. Nelson Riis (Kamloops, NDP):** Mr. Speaker, just as the Minister for International Trade is about to fly off to Paris to meet with his OECD compatriots to work hard in the next few days on the signing of the multilateral agreement on investment, I am presenting a petition on behalf of a number of my constituents who are adamantly opposed to the MAI as they presently understand it.

They believe that it is an attack on Canadian sovereignty. They believe that it will expand and entrench unprecedented rights to transnational corporations and that it will severely limit our government's ability to promote economic growth and job creation strategies. They speak to the fact that we are now in court with Ethyl Corporation of the U.S. over the fact that we tried to improve the environment of Canada and we are being sued over that.

They also mention the fact that certain clauses will be locked in for 20 years. I could read a long list, but I will not.

I believe the point is well taken that these folks do not like the MAI as they know it and are asking parliament never to sign the multilateral agreement on investment in spite of the minister's best efforts.

### SENIORS BENEFIT PACKAGE

**Mr. Nelson Riis (Kamloops, NDP):** Mr. Speaker, the second petition is from a number of residents in communities throughout British Columbia who are hearing rumours about the government's intention to introduce a seniors benefit package. Knowing what the provisions were for the last package they are totally panicked.

*Routine Proceedings*

They believe there are all sorts of hidden agendas here and are simply worried that the government is up to no good basically.

[Translation]

## TAXATION

**Mr. Nelson Riis (Kamloops, NDP):** Mr. Speaker, I suppose because it is tax filing time this is what initiated this last petition. A whole number of people feel that our present tax system is unfair, unjust and biased in favour of certain Canadians at the expense of others. They are simply asking for comprehensive tax reform.

## QUESTIONS ON THE ORDER PAPER

**Mr. Peter Adams (Parliamentary Secretary to Leader of the Government in the House of Commons, Lib.):** Mr. Speaker, the following question will be answered today: No. 86

[Text]

## YOUNG OFFENDERS ACT

**Mr. Jim Gouk (West Kootenay—Okanagan, Ref.):** Mr. Speaker, on behalf of the residents of West Kootenay—Okanagan, I present the first in a series of petitions in which the petitioners draw to the attention of the House that violent crimes committed by youth are of great concern to Canadians, that the incidents of violent crime by youth would decrease if the Young Offenders Act were amended to hold young persons fully accountable for their criminal behaviour and that increased periods of incarceration could deter young people from committing criminal acts.

Question No. 86—**Mr. John Reynolds:**

Can the Minister of Citizenship and Immigration please provide: (a) the rationale and justification for the right-of-landing-fee (ROLF) as it applies to the sponsorship of family members; (b) the total revenue collected as a consequence of this aspect of this fee since its inception; (c) the location of this revenue item within the public accounts for this department; (d) the amount spent from this collected revenue on Language Instruction for Newcomers (LINC) and an item breakdown on the use of this fund; (e) an outline of the accounting process in place to ensure proper use and distribution of this fund for LINC; and (f) any studies or documentation that may identify the LINC program is not duplicating English as a Second Language (ESL) program?

Therefore, the petitioners call upon parliament to significantly amend the Young Offenders Act, including but not limited to making protection of society the number one priority, reducing the minimum age from 12 to 10, allowing for the publication of violent young offenders' names, increasing the maximum three year sentence for all offences except murder to seven, increasing the penalty for first degree murder from a maximum of 10 years to 15 years, and ensuring parental responsibility.

**Hon. Lucienne Robillard (Minister of Citizenship and Immigration, Lib.):** (a) The introduction of the right of landing fee, ROLF, by the government in February 1995 was in response to extensive public consultations held by the Minister of Citizenship and Immigration Canada, CIC, in 1994 and to the government-wide program review exercise. During the public consultations it was recognized that, if the department was to continue to provide an acceptable level of service to immigrants in view of the government-wide commitment, a greater share of the costs should be transferred from the taxpayers to the direct beneficiaries of immigration services. Further, program review made reduction of the federal debt a priority for all government departments.

## THE FAMILY

**Mr. Paul Szabo (Mississauga South, Lib.):** Mr. Speaker, I am pleased to present a petition on behalf of a number of Canadians, including Canadians from my riding of Mississauga South.

On behalf of the family, the petitioners would like to draw to the attention of the House that managing the family home and caring for preschool children is an honourable profession which has not been recognized for its value to society.

• (1010)

The petitioners also agree with the National Forum on Health report which stated that the Income Tax Act discriminates against families who choose to provide care in the home to their preschool children because it does not take into account the real costs of raising children.

The petitioners therefore pray and call upon parliament to pursue tax initiatives to eliminate tax discrimination for families who choose to provide care in the home to preschool children.

The government concluded that the acquisition of permanent residence and Canadian citizenship had tangible and intangible value to the recipient. This value was derived from access to an enhanced economic and social opportunity in Canada as well as access to a wide range of programs and services available. The right of landing fee provides partial compensation for the many rights and privileges that landed immigrant status confers.

(b) The ROLF was implemented February 28, 1995. Since its inception a net revenue, revenue minus refunds, of \$458.5M has been generated.

Family class immigrants 19 years of age and over represent approximately 24% of all permanent resident landings in Canada. On this basis, total ROLF revenue derived from family class immigrants is estimated to be \$110.04M.

(c) Citizenship and immigration revenue, including revenue derived from the right of landing fee is located in the public accounts, details of expenditures and revenues, volume II, part I.

(d) All revenue collected by CIC is deposited to the credit of the consolidated revenue fund, CRF. The revenue generated by the ROLF does not go directly toward the department's budget. The ROLF revenue assists to generally offset the costs throughout the immigration portfolio.

The language instruction for newcomers, LINC, was funded by \$102M in fiscal year 1997-98 from CIC's contribution budget.

(e) Please see response for (d) above.

(f) Under LINC, CIC funds organizations for the provision of basic language training to adult immigrants in one of Canada's official languages. In some communities, other levels of government will fund language training options also.

[Translation]

**Mr. Peter Adams:** Mr. Speaker, I ask that all remaining questions be allowed to stand.

[English]

**Mr. John Cummins (Delta—South Richmond, Ref.):** Mr. Speaker, on October 28, 1997, I asked Question No. 33 and again on December 2, 1997, I asked Question No. 56. I have asked the hon. gentleman opposite on a number of occasions about the placement of these questions. The questions relate to the Oak Bay Marine Group, a company owned by Mr. Bob Wright, and a company perhaps favoured by the minister of fisheries. I wonder if the member can tell me the status of those questions.

As well, on December 1, 1997, I asked Question No. 51 which has to do with the aboriginal fisheries. Again it is another question which the minister may not be too happy to answer, but I would like to know what is happening to my question.

**Mr. Peter Adams:** Mr. Speaker, I have once again noted Questions Nos. 33, 51 and 56. I did follow up the previous time, I assure the hon. member, and I will do so again.

**The Deputy Speaker:** Is it agreed that all the remaining questions shall stand?

**Some hon. members:** Agreed.

*Supply*

## GOVERNMENT ORDERS

[English]

### SUPPLY

ALLOTTED DAY—HEPATITIS C

**Mr. Grant Hill (Macleod, Ref.)** moved:

That this House urges the government to act on the recommendation of Justice Horace Krever to compensate all victims who contracted Hepatitis C from tainted blood.

**Mr. Chuck Strahl:** Mr. Speaker, I rise on a point of order. According to Standing Order 43(2), I would like to advise the House that Reform Party members will be dividing their time during the speaking rotation today.

**Mr. Grant Hill:** Mr. Speaker, some victims of hepatitis C from tainted blood arrived on the Hill on Monday. They asked for a debate in the House. They asked the Prime Minister for that very thing. They sent him a letter saying "Could we please debate this? We do not think it is fair that some individuals should be compensated and others not".

The official opposition today is providing that debate by using our opposition day, a supply day, to do that.

The victims felt frustrated and angry and in fact impotent, they told me, and I, along with other members of my party, am honoured to be able to provide that voice.

The government's decision to compensate half of the victims is based upon some rationales. I would like to go over those rationales and try to refute each one of them in turn.

The first rationale is that the timeframe, 1986 to 1990, was unique.

The second rationale is that if they compensate everyone there will be a huge precedent set.

The third rationale is that the floodgates of medical claims would open wide and it would put at risk our health care system.

The fourth rationale is that since all 13 governments in Canada signed on to this agreement it must be right.

In turn, let me address those rationales. I consider them to be debating arguments rather than principle arguments.

• (1015)

The timeframe of 1986 to 1990 is an arbitrary legal phoney dividing point for the following reasons. It is very evident that regulators messed up; Judge Krever said so plainly and clearly. The special new test the government said was unavailable before 1986

*Supply*

was developed in 1958. I have practised medicine in this country and I have used that test for much of my medical career.

The ALT test was by no means new. In fact, as it became more and more useful for determining whether or not hepatitis C was present in blood, other jurisdictions used it much earlier than 1986. For comparison, in the United States it was used in New York in 1982. It only became a regulatory thing with the U.S. in 1986 when they said that since everybody was using it they should make sure that it was a federal regulation. In 1981 a premier official of the Red Cross in Canada recommended the use of this test. It was available and was accepted before. The date is an arbitrary legal date.

I do not mean to be really harsh on this but I think that decision is despicable.

Speaking on the issue that the floodgates would open, that the floodgates would sink our medical system, a precedent is a precedent. Two main precedents have been set on this issue in Canada for other medical issues, the thalidomide tragedy and compensation for HIV. I will be specific about HIV because it is so close in time and it is from the same contaminated blood.

There was no test available in 1989 for HIV. Compensation for all HIV victims in Canada who got HIV from tainted blood was offered and accepted. Has there been a floodgate of spurious medical claims because of that? Of course not. Canadians' compassion recognized that the severe effect HIV had on those individuals was a specific medical tragedy. Hepatitis C was as well.

The health minister went on to say that other medical misadventures like breast implants or obstetrical tragedies would be under the same cloak if we were to compensate all victims of hepatitis C. That is wrong. As I said before, I have practised medicine. I had medical malpractice insurance. If I made a medical mistake, I would personally be sued for that mistake. I am thankful that never occurred over a 25 year span. This was for personal errors. If a manufacturer were to make faulty medical devices, it would be sued. The minister's argument is absolutely wrong.

Let us go to the experience in other countries. Other jurisdictions have decided to compensate all victims of hepatitis C. Ireland comes to mind. I had a chance to talk with officials from Ireland. Their plan goes back to 1996 when they started paying individuals. I asked them if there had been an outpouring of frivolous claims or claims from other areas of medical malpractice. Zero. Not one single claim. The argument provided by the minister is absolutely ludicrous. It is just a legal argument.

In Ireland the officials said that their government tried to inflate the numbers of victims to make it look as if it would be a huge expense for the Irish public. That is an interesting thing which our government is trying to do. The Hepatitis C Society of Canada has

told me that its number of victims is about one-third the number the government is trying to foist on us. I do not understand this. The effect of other precedent setting compensation packages on the medical malpractice system in Canada is one big fat zero and Canadians know that. Hepatitis C compensation would do exactly the same thing.

The other argument is that since all governments have signed on to this agreement, it must be right. Every single government in Canada is implicated in this tragedy. Krever has said that the provinces as well as the federal government are responsible. The federal government takes the brunt of this responsibility sadly, but just because 13 people rob a bank, does that mean robbing a bank is right?

• (1020)

The arguments fall completely apart. The regulators in Canada failed. A huge human tragedy resulted. Canadians were harmed. Compensation should be paid to all those individuals.

I have an escape for the government. I believe we should always try to provide an escape clause for the government. It knows it has made an error in this. Here is how it can save face, look compassionate and say that it has listened.

A compensation package for everyone should be based upon some principles. First it should be non-adversarial. They should not have to go to the court. Second, payment should be based on showing a direct connection between hepatitis C and a blood transfusion. That involves some scientific evidence. Third, there should be the ability to return in a non-adversarial sense if the disease worsens. Finally, there should be the ability to go to court if an individual is unsatisfied with the compensation package. They should not be forced into taking a compensation package.

These principles give victims dignity and virtually all the funds go to the victims, not to lawyers.

On the issue of the Prime Minister saying that the vote coming from this supply day opposition motion is a vote of confidence, that is another feeble excuse to give his backbenchers the ability to vote as they should. Surely the Prime Minister as an experienced politician knows this. There is a very specific reference in clause 168 of Beauchesne's saying that the standing orders have completely deleted the ability of a confidence motion to follow upon the debates from a supply day motion. It is plain to see. I am going to table this so that the Prime Minister can read something he should have known.

All we ask, and this is something that is sincere and honest and open, is for the government to look at this principle. If the government is absolutely certain that there should be no compensation for any other victim of hepatitis C, let members vote freely. If the government will do that, the victims who came to Parliament Hill on Monday, those individuals who felt impotent and alone and

*Supply*

hurt by this government decision will say that they have had the debate and their day in the House of Commons of Canada.

That is my plea. That is my wish. That is my hope. I challenge the Prime Minister to allow that to happen.

**Mr. Greg Thompson (Charlotte, PC):** Mr. Speaker, I want to thank the member for his work on this issue. Everyone in this House knows he has taken a leadership role in this issue.

Aside from the moral persuasion that we use in this House from time to time, what else can we do to convince other members on the government side that this vote has to be won?

We have to prove to Canadians that we are a compassionate country. In my opinion, this is probably the worst travesty in the history of health care in this country.

Aside from moral persuasion, what can we do in the next number of days to ensure that this very important vote is won on the floor of the House of Commons?

**Mr. Grant Hill:** Mr. Speaker, moral persuasion is sometimes a powerful persuasion. The persuasion I see as the most effective is the persuasion of the victims.

We have a few days now between this debate and when the vote will take place. I simply ask the victims who have suffered to go to their MPs. I expect them to come to me with their faxes and their letters, but best is for them to look their members of parliament in the eye and express what this disease has meant to them. Look them in the eye and ask "Do you agree with giving compensation to some and no compensation to others?" When that happens I do not care what the Prime Minister says. I do not care what the Prime Minister does. An individual in their heart will have to say "I do not believe it is fair to turn some out on the street".

• (1025)

The victims will keep this debate alive. The press have asked me over and over again how I will keep this debate alive. This is not for me nor is it for the member who also has had a profound interest in this issue. This is for people who have been harmed by a public system. Those victims will not go away. The government will have this hanging around its neck for the rest of this term unless it says that it made a mistake. The government does not have to lose face. We are not going to vote its members out of office for this but if they continue with this, their offices are at risk.

**Mr. Bill Blaikie (Winnipeg—Transcona, NDP):** Mr. Speaker, I would like to seek a comment from the member particularly with respect to the matter of confidence.

I would like to reaffirm the interpretation the member gave to the standing orders. When considering an opposition day motion, for a

decade now opposition day motions have not been procedurally speaking matters of confidence. A long time ago we changed the rules so that precisely what the Prime Minister is trying to create in the context of this opposition day motion would not occur. In days before that rule change, members would always vote according to which party they belonged to, which side of the House they belonged to because these motions were considered to be matters of confidence.

They are not matters of confidence and can only be made matters of confidence in two ways. First is by the leader of a party declaring it so and second is by the members of that party whose leader has declared it to be so abiding by that particular declaration.

I would like the hon. member's opinion on this. This is a perfect opportunity for members of the Liberal backbench to say "No, we are sorry Mr. Prime Minister but we think this should not be regarded as a matter of confidence". It is not part of the government's platform. It is not part of the government's budget. It was not in the throne speech. It was not in all that which might be legitimate we argue might be a matter of confidence. It is an entirely separate issue on which parliament should render a judgment unhindered by the confidence convention.

I would join with the hon. member in calling upon Liberal backbenchers to seize this moment to make parliamentary history and say from here on in that we do not accept that these kinds of things will be needlessly made matters of confidence.

**Mr. Grant Hill:** Mr Speaker, the member is quite an expert in the rules and I claim not to be such an expert.

Let me read from the rules. On December 20, 1984 the House removed references in the standing orders which described votable motions on allotted days, that is today, as questions of confidence. That was removed. They are not questions of confidence.

I commit to the Prime Minister that I and my party will not make this an issue of confidence. The government will not fall on the basis of this. It cannot fall. If the Prime Minister says it is a matter of confidence, I think he is making a grave error. I once again strongly encourage him to allow members of parliament to vote with their hearts.

**Mr. Randy White (Langley—Abbotsford, Ref.):** Mr. Speaker, it is a privilege to speak to this issue. I am going to cover the issue of confidence and exactly why this government is incorrect on this issue. I am going to refer to another issue which happened in this House almost two years ago today.

The issue we have before us today is actually one of integrity, fairness and leadership. I was raised to believe that you had to pay for your mistakes and be responsible for your actions. I think such is the case for the federal government on this issue.

*Supply*

• (1030)

The issue of compensating people who have contracted the hepatitis C virus because of receiving tainted blood, further as a result of government actions, must be dealt with in a fair and just manner.

It is ironic that today we are dealing with a health minister who has failed to answer the call of the victims of hepatitis C. Two years ago that same health minister was the justice minister who was asked to come into the House on the call of some other victims. That is when the Reform Party tabled a national victims bill of rights. Of course we all know what happened to that.

That same minister stood and said "Yes, we all care about victims. We are really concerned about victims and we will do something about this. We will develop a national victims bill of rights". Today what do we have? Nothing, zero, nil. Just a bunch of rhetoric. It is ironic that it comes from the same individual who is now the health minister.

Today we have no victims rights and we have no hepatitis victims getting compensation. Is that familiar or what? We are looking at the same instance where the heat was on the government by victims of crime all across the country. It bent, took it into the House of Commons and said something would be done. The heat went off and it was dropped. It is so typical. Canadians often wonder why they lose confidence in the people sent to Ottawa. This is exactly why.

I will read something that is very interesting about the issue of confidence. Two years ago, when I dug back into the *Hansard* debates, I asked a question of the very same minister who was then the justice minister on a supply day, which is rather ironic, as it is today:

Earlier today the justice minister said he was willing to support the Reform Party's efforts to develop a national victims bill of rights.

He also indicated there would be a free vote on that issue today at 6:30 p.m. Could he confirm it?

The minister's response was:

The answer of course is that when there are resolutions, as there are today involving victims rights, members of this party vote as they see fit. I already told the House this morning that I am going to be voting in favour of the resolution because I share the objectives expressed by the hon. member. I expect that other members of the government side will vote as they see fit.

This is the identical issue. It is about rights. It is a supply day. It is about confidence in a vote, and yet two years ago the same minister stood in the House and said that was no problem. Today, when faced with an even more compassionate issue as far as victims who are in varying need of health care, of compensation, the government says it is not an issue of confidence.

It is an issue of confidence and therefore we must vote together on it. I just do not understand what is with this government. It does not make sense.

Let me ask my colleagues and those watching today whether this is the expectations they have of a minister and a government. Is this what they are wanting, a flip flop as they see fit? I think not.

I guess one of these days this will come back to haunt the government. The government cannot keep changing the rules as it sees fit.

Let us talk for a moment about the practicality of the government and the minister not compensating those who have contracted hepatitis C. The first issue I think about is the multimillions of dollars that will be spent by those already victimized trying to receive compensation given to others in identical circumstances.

What kind of logic is there in this? These people are already victims. Now the government is demanding that these people get the same compensation given others by an arbitrary cut-off line. They will have to go to court and fight. Many of them cannot afford the bills.

• (1035)

Who gets something out of this? The lawyers will get wealthy, I am sure, all across this land. But what about the victims? It does not make sense. I would like to see members on the other side justify this in those terms. Many victims of crime call that revictimization, and I would agree with them.

Let us talk about another issue. Justice Krever spent four years looking into this issue and spent millions of dollars trying to find a fair and reasonable answer to the issue. His recommendation after four long years, which I presume the government would like to accept, is to compensate those infected with hepatitis C; not those over 40, not school children, not women, but all those who have hepatitis C. That is as simple and as clear as a bell. Does this make sense? Of course it does. Then why is there an arbitrary decision to cut a line and say that some will and some will not? Does that make sense?

Let us talk about something even closer to home for many of us. The government over the last number of years is well known to have blown multimillions of dollars out the door, billions of dollars in fact. It calls this an issue of money. The government asks if it goes down the line and compensates everybody, can it afford it.

Let us look at some other things the government says it can afford. \$1.4 million over three years to the Czech municipal authorities is okay but compensating those prior to 1986 is not. \$473,000 to look at an overhaul of the Czechoslovakia judicial reform is okay but compensating hepatitis C victims is not. \$500,000 to reintegrate Malian soldiers back into their society is okay but compensating hepatitis C victims prior to 1986 is not. \$14 million to provide Canadian built locomotives to Senegal is okay but compensating victims of hepatitis C prior to 1986 is not.



*Supply*

I really think the average taxpayer or the average person looks at issues like this and asks “Why is that okay but compensating those prior to 1986 is not? What kind of rationale could a government come up with to justify that?” Is it fair to Canadians? I think not.

\$450,000 to establish a Lebanese parliamentary institute is okay, yet the government does not have the courage of its convictions to treat its own Canadian citizens fairly. It is quite shameful actually.

The government has compensated all AIDS tainted blood victims. The government has compensated the east coast fishermen for the loss of their fishery. In opposition the Liberal politicians before us pressured the Conservatives to compensate all thalidomide victims. Now they exclude, arbitrarily I might add, all hepatitis C victims prior to 1986.

I understand my time is up, but I do have an amendment to the motion. I move:

That the motion be amended by inserting after the word “House” the word “strongly”.

• (1040)

**The Deputy Speaker:** Order, please. The amendment appears to be in order.

**Mr. Jim Gouk (West Kootenay—Okanagan, Ref.):** Mr. Speaker, the member who just spoke talked about how this would force many hepatitis C victims to go to court and how the government would use money defending itself.

Would he comment on the fact that the government is using taxpayers’ money to defend itself against taxpayers and the position that puts taxpayers in when going to court to defend themselves against the government and supplying the money to their opponents so they can fight them?

I also have another question if it is appropriate. I know there are certain rules in the House and I do not want to go against those rules. Approaching it from the other side, could the hon. member comment on what impact he thinks the speech he just made had the single Liberal listening to it?

**Mr. Randy White:** Mr. Speaker, I will answer his second question first. It is ironic that all opposition parties raise this issue. We raised it yesterday and for months and months now. Yesterday we gave the government notice in the House that there would be a very special debate on the hepatitis C issue.

The media looked at it. The rest of the country is looking at it. Ironically I find one Liberal member in the House.

**The Deputy Speaker:** I know that this would be of interest to all, but I think the hon. member also knows that it is improper to

refer to the absence of others. I think that is what he is in effect doing.

**Mr. Joseph Volpe:** Come on, Randy, tell us who it is.

**The Deputy Speaker:** I have made the argument that the member is referring to the presence of one but the effect of that, as he knows, is to refer to the absence of the others. I know he would not want to do that. It would be a breach of the rules.

**Mr. Randy White:** Mr. Speaker, I make no attempt whatever to say there is only one Liberal in the House.

The issue concerns everybody in opposition. This is not something where the government can sweep it under the table and hope it goes away. It will just not go away. It has to learn that absence does not make the parliamentary heart grow fonder. In fact it is just the opposite.

The other issue my colleague asked about was paying the bills for this. This is ironic. Why is it victims across the country, whether it is hepatitis C victims, victims of crime or victims of virtually everything in our society, end up footing the bill and fighting for rights the government has arbitrarily given to others? The cost will not only be enormous personally for some of these people. There will be the costs to government, court costs, judicial costs and the cost of legal aid lawyers. It will go on and on for years. Yet the government steadfastly says that is okay, that it is their problem and not its problem. It is a sad case for victims of hepatitis C.

**Mr. Peter Stoffer (Sackville—Eastern Shore, NDP):** Mr. Speaker, I stand on behalf of the New Democratic Party and thank the Reform Party for its motion today. I also wish to thank publicly all hepatitis C victims and AIDS victims in Nova Scotia.

However I have a slight concern. I will be corrected if I am mistaken, but we certainly do not like the idea of a two tier compensation system for hep C victims.

Having said that, I would like to ask if they believe in a two tier health system. In Alberta Bill C-37 is now about to become legislation, which will do erode the public health care system. Would the hon. member comment on that?

• (1045)

**Mr. Randy White:** Mr. Speaker, leave it to the NDP to bring something like that up when we are talking about hepatitis C.

The issue of health care is another issue that we have gladly debated in this House from time to time. What the NDP should do today is focus on a very important issue that is over there, not over here. The NDP would be very wise in this House today to try to understand the situation as it is.

We have thousands upon thousands of people who have arbitrarily been excluded from compensation by a government that cannot

*Supply*

justify it. We have victims across this country who have been arbitrarily shut out of a system by a government which is wrong. The NDP would be very wise to maybe expand its horizons. The House would be better off as well.

**Mr. Joseph Volpe (Parliamentary Secretary to Minister of Health, Lib.):** Mr. Speaker, I listened attentively to the previous two interventions and to the questions and answers associated with them. I am more relieved now that we are back in focus. I thought initially, without being sarcastic, that the issue was no longer one as indicated by the motion but rather one of wrangling about parliamentary procedures.

It is important that on an issue like the one before us today we think in long term vision, we look at the errors of the past, we try to reconstruct and go forward.

In dealing with the complex issue of assistance for those Canadians infected with hepatitis C during a time when the blood system could have responded differently but did not, it is important to point out that all Canada's governments, the territorial and provincial governments of all partisans stripes as well as the federal government, have taken decisive actions to ensure that such tragic events do not occur again. It is a point that should be kept in mind as we debate the issue over the course of this day.

It is also important to keep in mind that public faith and confidence in blood safety have suffered as a result of past events. We should not exasperate that. Canadians need reassurance that the blood supply, the blood system today, is safe and effective in Canada as it is in any other country. That is what I would like to speak about today, the progress made by governments to resolve the issue of confidence in blood safety.

I am pleased to inform the House on how governments, this government in particular, are working together with partners to build a new, safe and integrated blood system. In speaking about that progress, I will be speaking about partnership. Restoring confidence in blood safety and building a better blood system hinges on bringing many partners together to achieve a common goal. Partners and stakeholders are essential to any effective national system. This spirit is our guide in building a better blood system where all stakeholders can have confidence that they play a role and have a voice that will be heard.

In Canada, as elsewhere, governments, consumers, those harmed, their families, specialists, scientists and others have all been working to ensure safer blood supplies and better systems of delivery.

• (1050 )

In Canada we have made a great deal of progress in designing an appropriate structure for our new blood system. Working closely together with our provincial and territorial partners who own and

operate the blood system as a part of their health care systems, we are well on track with transition plans.

A transition bureau has already been appointed. The bureau is working hard to ensure that the new Canadian blood services is up and operating as soon as possible with a target date for September 1998. Of course many operational details still have to be worked out. However, all those involved are committed to making the transition as smooth, as seamless and as safe as possible.

Canada's new blood system is a product of consensus and partnership among all key stakeholders. This is only right because the blood system belongs to each one of us.

By continuing to work together partners and stakeholders will achieve a new system in which we can all take pride. This is not just a technical or management exercise. Rebuilding confidence means earning respect and the good faith of blood donors, consumers, patients and all our citizens.

Mr. Justice Horace Krever's commission provided a clear assessment for Canadians about what went wrong in the 1980s and how we can ensure that it never happens again. Justice Krever set a path that governments and stakeholders are following. The way he has shown was drawn from what he heard during the extensive hearings of the commission and his careful deliberations on the events of the past.

One way we can show we have learned from the past is by building a system with all the feasible safeguards to ensure the past does not happen again.

Throughout the course of public hearings of the commission consumers, transfusion medicine specialists and management experts identified many deficiencies in the old blood system. They identified flaws as a lack of systematic, co-ordinated and rapid response in the face of emerging safety risks. They saw a lack of accountabilities for safety and governance. They saw rigid financing arrangements that did not reflect the focus on priorities of safety. They observed a fragmentation in blood science and research and development. Governments saw all this as well.

The Government of Canada took a lead role in bringing provinces and territories together to discuss ways to solve these problems. We asked consumers and scientists to join in the discussion. We consulted, we listened and we considered options.

Last September at a meeting in Fredericton, Canada's health ministers built on the substantial progress that had already been made and made a decisive step forward in the creation of a new, single agency to manage Canada's blood system.

The new Canadian blood services moved a step closer to becoming fully operational by September 1998. That agency will be responsible for managing all aspects of an accountable, fully integrated blood system. It is based on four key principles that

*Supply*

government set out for the new blood system in 1996, principles which partners and stakeholders endorsed with enthusiasm.

First, the safety of the blood supply is of paramount importance if we want to earn the confidence of Canadians.

Second, a fully integrated approach is essential if we are to have a clear and coherent system in which all participants work effectively and co-operatively.

• (1055)

Third, accountabilities must be clear so that people inside the system and outside it know who is responsible for action.

Fourth, the system must be transparent because it needs to operate in full view with its windows and doors wide open for public inspection. All those involved in the planning of the new blood system will examine his advice carefully.

Let me say a word about Quebec. So far, Quebec has decided not to be a part of the blood system plans. Quebec is pursuing its own efforts to incorporate the blood system operations in its health care system.

Ways to collaborate with the Canadian blood system and the new blood system can be discussed. Of course blood and blood products used by patients in Quebec have to comply with federal regulations for safety and efficacy, the same as anywhere else in Canada.

What role does the federal government play in the new blood system? The role is quite different from that of the provinces and the territories. The provinces and territories are responsible and accountable for the national blood program. They set funding, broad health policy objectives and ensure the overall integrity of the system. The Government of Canada is supporting them as they manage the transition to the new system. This is very much in keeping and consistent with our role in pursuing better ways to improve and enhance the health of all Canadians.

For that reason, the government agreed to provide a grant of up to \$81 million to support the start-up of the new system. Will the Government of Canada play other roles now and when the system is up and running? Of course.

Blood safety is a priority for the government and the government will continue to work to make blood as safe as it can be.

**The Deputy Speaker:** I think it is fair to say that the hon. member's time has expired. It is time for questions and comments.

**Mr. Grant Hill (MacLeod, Ref.):** Mr. Speaker, the motion today is pretty specific, to decide whether members of Parliament agree with compensating all the victims of hepatitis C as Justice Krever suggested.

I listened carefully to the member's commentary and I have not heard much on the actual motion. I would like to ask him a direct question.

Does he believe that Justice Krever's recommendation should or should not be followed?

**Mr. Joseph Volpe:** Mr. Speaker, I welcome the question because it allows me to remind myself and everyone else that the motion gives us an opportunity to address the entire issue.

Like the member opposite, I was a little dismayed that we were not addressing the issues as he presented them or had begun to present them but we were talking about procedures.

Since he has raised the question of the relevance of Judge Krever's impact on the motion today, I regrettably could not finish so that I would have satisfied his question prior to its being raised.

I will take the opportunity to do that now. I want to advise him that in dealing with Judge Krever's very comprehensive report one must take into consideration the nature of risk in a complex biological substance such as blood and blood products. Canadians understand that even when safety is at its highest, the very nature of blood means that we can never let our guard down.

Judge Krever advised Canadians that because of the nature of blood there should never be complacency about safety. How to make a safer, better system which is prepared to face new and emerging threats to safety is one of the key challenges facing all those involved, including governments, scientists, medical and technical specialists, patients and donors.

Health Canada is a regulator of the blood supply system. Health Canada regulates blood and blood products under the Food and Drugs Act and the department conducts national disease surveillance. Those roles preclude active involvement in the operation of the blood system, but as a regulator Health Canada is committed to the same high standards of accountability, openness and transparency that we expect from the provinces and territories in the operation of their blood systems. Canadians deserve no less.

• (1100)

Let me describe some of Canada's recent efforts to strengthen the blood safety system, which is directly relevant to the member's question. First, Health Canada has established a blood safety council to advise the government on matters of blood safety and to be a source of information and guidance on such matters from a national perspective. Consumers sit on this council.

Second, the department is working actively with other partners to reduce risk of bacterial contamination of blood. Third, it is developing a regulatory framework that will take blood regulation forward into the future. It has an expert advisory committee on blood regulations to provide expert input on specific blood regulatory matters. Fourth, disease surveillance capacity related to blood safety has been strengthened. A blood-borne pathogens unit has been set up and improvements in field epidemiology have been made. I am happy to say that today Canada has a stronger capacity

*Supply*

to respond to new and emerging blood safety risks as a result of such improvements, improvements recommended by Judge Krever. This is evidence that the government attaches great importance to blood safety.

Members want to know that the government is working to identify potential new threats to the safety of our blood supply and that it is ensuring that never ends. The government will provide a million dollars a year to the Canadian blood services, money that will be specifically targeted for blood science, research and development. That funding will keep Canadians in the forefront of blood science and maintain Canada's position in international blood research.

I know members want me to use the rest of the time to point out that in the new system Canadians are building, better science will be there to support strong and effective regulations. It will be there to help the system meet the highest safety considerations and it will be there out in the open for all stakeholders to review.

[*Translation*]

**The Deputy Speaker:** The time for questions and comments has expired.

**Mrs. Pauline Picard (Drummond, BQ):** Mr. Speaker, it is a pleasure to rise this morning in support of the Reform motion, which states "That this House urges the government to act on the recommendation of Justice Horace Krever to compensate all victims who contracted hepatitis C from tainted blood."

When my leader made me responsible for health upon my arrival here in 1993, the tainted blood scandal was one of the very first issues I had to look into. I did so with great compassion for the victims of this tragedy. There are no words to describe what has certainly been one of the worst scandals of modern day medicine in Canada.

Since 1993, the Bloc Quebecois has asked more than 100 questions about the inquiry into the tainted blood scandal. These questions were always intended to advance the inquiry presided by Justice Krever. Parliamentarians will recall that this inquiry ran into some roadblocks. These roadblocks were not always set up by people outside this Parliament. The government of the day seemed intent on throwing a monkey wrench into the process so as to stifle the tainted blood inquiry.

• (1105)

The blood inquiry has gone on for four years and cost \$15 million. We also know that documents that could have been very useful to the inquiry were destroyed and that this did not seem to worry the government unduly, because those who destroyed the documents have gone unpunished.

There were also the attempts to block Judge Krever's efforts through the courts. These attempts were never justified, any more than the sometimes extreme comments made about the inquiry.

In November 1996, the Prime Minister maintained that the law prevented him from disclosing documents that included transcripts of cabinet deliberations in 1984, the time when scientists were sounding warnings about the discovery of a dangerous new virus in blood banks.

We are being told that only those who contracted the disease between 1986 and 1990 are being compensated because, although that was when the facts were known, preventive measures had not been taken. We know that there were cabinet transcripts setting out the situation as early as 1984, so why were these documents not disclosed? One could suspect that they contained evidence that the government was starting to realize back then that the hepatitis C virus and other viruses were contaminating blood.

Under the current program announced by the federal and provincial health ministers in Toronto on March 27, the federal and provincial governments are going to contribute \$1.1 billion to a compensation fund for hemophiliacs who contracted the disease, but only if they did so between January 1, 1986 and July 1, 1990.

This fund will also be used to help those individuals infected by a spouse or parent during this period, as well as those who contracted HIV from a spouse or parent infected by blood or blood products.

Of this amount, the federal government's share will be \$800 million. The provinces will put up the other \$300 million, and will contribute an additional \$1.6 billion over the next 30 years for drugs and various forms of health care.

In my opinion, this represents an enormous effort, in these times of tight budgets and cuts to federal payments to the provinces.

The program is restricted to victims who contracted hepatitis C between 1986 and 1990, because the Red Cross and the governments did not take advantage of tests available, in the U.S. in particular, during that time. Prior to 1986, there was no effective test for detecting the disease, which was not known in the form hepatitis C takes today. The governments therefore acted in accordance with what was known at the time.

In my opinion, this program and the governments which signed it were in good faith. Now, however, with a bit of hindsight, we see certain signs that could enlighten us as to the birth of this program and all that could be added to it. We should keep in mind that the provinces will have to spend another \$300 million, in addition to providing all health care services and drugs required, at a time when they have just experienced extraordinary cuts to the Canada social transfer.

*Supply*

**An hon. member:** Extraordinary cuts.

**Mrs. Pauline Picard:** As my colleague has just said, these cuts could even be called extraordinary.

• (1110)

When a government, which is also one of the key parties with responsibility in this entire affair, turns up with a zero deficit and a budget surplus which will probably be \$20 billion by the end of 1998, I believe that finding a few million dollars to distribute among all hepatitis C victims is no big deal. Regardless of what may have happened, these people were contaminated through blood and need support.

Since coming to power, the Liberals have reduced the deficit—I want to refer to this again and I am going to provide figures—mainly by passing the buck to the provinces. Between 1994 and 2003, this will amount to \$42 billion out of the coffers of Quebec and the Canadian provinces. That amounts to 52% of the cuts imposed, while the federal government's share amounts to barely 12%. This is an eloquent first clue as to the financial situation of the governments.

By the year 2003, Quebecers and Canadians will face an additional \$30 billion in federal cuts to health care, education and social assistance. The provinces, obviously, are going to have to figure out how to absorb them, as it is they who will have to bear the burden and not the federal government. In the meantime, the federal government is coming up with budget surpluses, and by 2000—and I say 2000 advisedly—the employment insurance fund will have accumulated an excess of \$25 billion on the backs of workers, the unemployed and the sick.

The representatives of the governments that agreed to compensate the victims of Hepatitis C as humanely as possible did not all start off on the same footing in terms of their ability to pay.

The tainted blood scandal in Canada is a national tragedy, which appeals to Canadians' and Quebecers' sense of compassion. The point of the exercise is not to point the finger, but more importantly to provide justice to the victims of a tragedy of unprecedented proportions.

This government prides itself on taking full responsibility for the safety of Canada's blood system. It can and must set up a special no fault program. Then, afterward, the issue of setting up a more extensive no fault system should be debated by Canadians as a whole.

For the time being, I invite all Liberal members in this House to support this motion to make it clear to the government that it has a moral and financial responsibility to correct an incredibly unfair situation.

**Mr. Mark Assad (Gatineau, Lib.):** Mr. Speaker, this issue has tragic implications. I have been involved for six or seven years for

the simple reason that one of my constituents, Mr. Saumure, is an innocent victim and is fighting over this issue. I think everyone in the House knows that.

I was deeply touched by Mr. Saumure's testimony. Two of his brothers also contracted that terrible disease.

We must vote on this motion and anyone who cares would want all those who were contaminated to be covered by a compensation agreement. After all, they are innocent victims in all this.

In my opinion, the initiative should come from the provincial health ministers. If the provincial health ministers—

**Some hon. members:** Oh, oh.

**Mr. Mark Assad:** Mr. Speaker, could I please continue?

• (1115)

**The Deputy Speaker:** Order, please. I would ask members to recognize the hon. member's right to put his question or to make his comment.

**Mr. Mark Assad:** Mr. Speaker, if provincial health ministers took the initiative, I am convinced that the federal health minister could open the door and reconsider the whole issue.

It was rather difficult to get the provinces to approve the agreement that was signed. If the Minister of Health rose in the House and said he would consider the possibility of compensating the other victims, the provinces would most certainly say that he should foot the entire bill. This is a fundamental issue for everyone concerned.

**Some hon. members:** Oh, oh.

**Mr. Mark Assad:** All this shouting is absolutely useless. What is needed is a consensus between all governments on this issue. We have a bunch of whiners on the other side, the NDP—

**Some hon. members:** Oh, oh.

**The Deputy Speaker:** Order, please. The hon. member for Gatineau has the floor.

**Mr. Mark Assad:** Mr. Speaker, I wonder if the NDP's convictions are as strong as its shouting is loud.

It is very simple. We need a consensus among all governments on this issue. If the provinces take the initiative, I am convinced that the Minister of Health will agree to reconsider the whole issue of compensation.

So I am asking my colleague if she agrees.

**Mrs. Pauline Picard:** Mr. Speaker, I would say that I am not at all in agreement and that I am very surprised by the stand taken by the hon. member, who made the headlines today with his extreme compassion for all hepatitis C victims and who, according to the newspapers anyway, would like to vote against his party line.

*Supply*

He tells us today that what is needed is the agreement of all provincial health ministers, when the provinces have reached their limit, as I gave figures to show earlier. So far, they have made an exceptional effort, doing everything they could.

I would like to tell the hon. member that, when this same government that is forking out \$900 million for submarines to keep the military happy, that is spending \$2.5 billion on millennium scholarships that nobody wants, and that is buying over \$1 billion worth of helicopters, cannot even come up with a few million dollars to compensate all hepatitis C victims, I hang my head. It is unbelievable that the provinces are being asked to do more, when they must manage the health care system.

I appeal to the intelligence of all members of this government and urge them to vote in favour of the Reform motion.

**The Deputy Speaker:** The time allotted for questions and comments has expired.

[*English*]

**Mr. Bill Blaikie (Winnipeg—Transcona, NDP):** Mr. Speaker, given that the Prime Minister has declared this motion, I would say contrary to the spirit of the rules of the House, to be a matter of confidence, we can already see Liberal members running for cover, hiding under any little rock they can find from the reality that they are being presented with a compelling case for the Liberal backbench exercising the freedom which is theirs, both individually and politically, to tell the Prime Minister this is not and should not be declared a matter of confidence.

• (1120)

One can imagine the Prime Minister going to the people of Canada and saying we have resigned because parliament did not agree with us on our hepatitis C compensation package and we are going to have an election. That is what the Prime Minister said, he was willing to have an election over this particular package.

One can imagine what that election might be like. I think if we were to have an election which in effect would become a referendum of a sort on whether this hepatitis C package was legitimate and reflected the values of Canadians, the Liberals might be surprised to find out just how much of a majority of Canadians agree with the views that are being expressed on the opposition side here today.

People who are suffering from hepatitis C and who contracted that because of tainted blood should not be divided into two groups, those who qualify for compensation and those who do not on the basis of some arbitrary judgment arrived at 1986 as the dividing line. We know the use of 1986 as the cut-off date is something that could have been argued otherwise by the government if it had

wanted to do so. It is not a hard and fast argument that the government is making. We know that the liability issue is not as clear as the minister would like us to believe.

The ALT test used to screen non-A, non-B hepatitis, as it was then called, was developed in 1958. In 1981 a *New England Journal of Medicine* study recommended this surrogate testing to screen for hepatitis C as did another eminent North American medical journal in the same year.

The Krever report on page 638 shows that the Red Cross and the federal health department discussed the test in 1981 but rejected it due to the expense. The victims were abandoned then due to the cost of prevention and they are being abandoned now due to the cost of compensation. In both cases we have governments making decisions, not on the basis of what is right, what is morally just, of what reflects the values of Canadians, but they are making these judgments with a calculator in their hands.

At the same time we know about the billions of dollars that are spent by the federal government, and for that matter by provincial governments, on many other things that are less deserving than compensation for people who have innocently been contaminated and made to suffer as a result of tainted blood.

I want to address the question that was raised by the member for Gatineau having to do with what appears to be the Liberal argument now that somehow the provinces should show leadership with this.

Next month I will have been here 19 years and I have heard a lot of spurious arguments in the House of Commons. But this has to be one of the worst I have ever heard, that the provinces should pick up the tab and show leadership on an issue of compensation for victims who suffered because of mistakes that were made by a federally regulated agency.

This really has to be a line of thought that could only be developed by a Liberal backbencher looking for a place to hide because of a lack of courage to stand up to the Prime Minister and say this is not a matter of confidence, this is a matter of doing the right thing and we are going to vote to do the right thing no matter what we are told to do.

Surely it was up to the federal government to provide leadership just on the basis of who was responsible, who was the regulatory authority. The provinces already have the burden of looking after the people who are sick as a result of this and are having to bear that burden in the context of billions of dollars being removed from their health care budgets by the cutbacks that were perpetrated by this very government. To turn to those provinces now and say they should show a little more leadership on this is absolutely preposterous, politically and morally, that the federal government should turn to the provincial governments and say they should show more

leadership when they are not in a position to show that leadership because of the very cutbacks the federal government has brought about.

• (1125)

We in NDP support and have supported all along the notion that the people who contracted hepatitis C as a result of tainted blood should be compensated no matter when they were contaminated. We support the Reform Party motion on this and we urge the government backbenchers to. Perhaps it would help if all the House leaders of the opposition parties got together. We are going to be saying this individually throughout the day.

To make it clear, we do not regard this as a matter of confidence. We do not think that if parliament were to say to the Government of Canada that it does not think its compensation package is adequate, change it, make it more generous, make it more compassionate, that this is something over which a government should fall, something for which there should be an election call. The only person making that ridiculous claim is the Prime Minister. He stood in the House yesterday and said this is a matter of confidence.

In fairness, the Prime Minister is acting within the rules of the House. The member earlier was talking about the McGrath committee in which we recommended that, if implemented, all the matters of confidence be removed from the standing orders of the House and that confidence be a matter of political determination. The Prime Minister is politically determined that this will be a matter of confidence.

It is now up to the Liberal backbenchers to politically determine, to individually determine whether the Prime Minister has made the right decision on this or whether they have an opportunity on Tuesday to make parliamentary history, to say to the Prime Minister he has made a mistake on the package in the first place and by declaring this a matter of confidence.

They should vote the way they think is right in spite of what he said about this being a matter of confidence because when they think it over, if the motion were to pass and parliament were to express that the compensation package is not good enough, the Prime Minister will not see the governor general the next morning. The next morning they are going to say that maybe they should rethink the package, maybe they should expand it, maybe it should be more generous, have a motion of confidence passed in the House or simply declare that it was not a matter of non-confidence. All these things are possible within the rules.

I urge the Prime Minister to see things differently. I urge Liberal backbenchers to see things differently. They are on shaky ground, ethically and politically. I do not think Canadians accept that victims of hepatitis C should be divided into two groups, those who were contaminated after 1986 and those who were contaminated before 1986.

### *Supply*

The government is putting forward an argument that it is trying to be legally cautious. It does not want to leave itself and other governments open to a precedent setting judgment. We have precedents already. We have the precedent of all people who contracted AIDS through tainted blood being compensated no matter when they contracted HIV. Why not pay attention to that precedent? If we are precedent conscious, why not pay attention to that precedent? Why not pay attention to both precedent and experience in other countries? The member for Macleod said earlier this has been done in Ireland. Has there been this rush of claims against the health care system? Apparently not. The government should muster up its moral courage.

This morning we were at the prayer breakfast. Let us ask ourselves what would Jesus do in this situation. Would he say to all the people who were sick with hepatitis C that they will compensate only some and not others? I doubt it.

• (1130)

**Mr. Werner Schmidt (Kelowna, Ref.):** Mr. Speaker, I would like to commend my hon. colleague from Winnipeg—Transcona and I would like to ask him a question.

I wonder if the hon. member would venture to speculate about which way the people of Canada would have more confidence in the government: if the government insisted that it not pay, or if the government said it did make a mistake, there was some negligence and that it had the moral responsibility to expand the package. Would that perhaps engender more confidence in the government than insisting that it was right even when it was wrong?

I think the hon. member knows full well the moral dilemma of doing what is right. Everyone makes a mistake once in a while. I wonder if the member would comment on that particular issue. What does generate confidence? Is it insisting on a political answer or is it insisting on doing what is right?

**Mr. Bill Blaikie:** Mr. Speaker, I think Canadians would have a lot more confidence in their system of government, not just the government, and in the political process if they felt they were being governed by a process in which political parties, and governments in particular, because they are often the ones who make the decisions, did not feel compelled to defend to the death every last decision that they make no matter how wrong that decision may come to be seen or judged to be, even by themselves.

I agree with the point the hon. member is making. Canadians would have more confidence, not less, in a government and in a political process in which political parties and particularly government were able to say that they would truly allow the House to judge proposals on their merits. It must not be declared as a matter of confidence or, as is sometimes the case, it is not formally declared a matter of confidence, as it was yesterday by the Prime Minister, but is informally communicated to the members of the

*Supply*

government caucus that this is something they are expected to be obedient on.

Canadians would have a lot more confidence in a system in which that did not take place as often as it does. I think there is a place for confidence. I think there is a place for governments to run on certain things and expect people who run with them to toe the line. However, I believe that should be a limited range of proposals and things.

The problem with the Canadian political system is that the range is like this instead of like that. We need to broaden and expand the range of issues on which members of parliament can express themselves as individuals or as representatives of their constituents, however they judge that to be possible. I believe all political parties have a job to do in that respect, but governments in particular because they are the ones who make decisions that have the immediate effect.

**Mr. Joseph Volpe (Parliamentary Secretary to Minister of Health, Lib.):** Mr. Speaker, I want to thank the hon. member for raising the issue of political discussions in this House. This is of course the place to have political discussions. I think he perhaps deterred debate a little when he talked about procedures and the significance of procedures in the House. However, what I think he really wanted to talk about were the merits of compensation packages placed before victims for consideration.

If I could be allowed a moment I would like to present this to members of the House for consideration so they can understand exactly what it is that 13 different governments in this country established after taking into consideration all the health priorities, government priorities and concern for each and every one of their electorate.

The governments came forward with a package to establish a \$1.1 billion fund to compensate victims. They also stated that services would be provided by the provinces over and above the normal services.

Finally, and most importantly, something we should not ignore is that there is a third component to this which is that the courts must accept all of the deals or go on to what is available to everyone right now which is access to the courts for consideration of—

• (1135)

**The Deputy Speaker:** Order, please. The member for Winnipeg—Transcona will require some time to respond and he has 15 seconds.

**Mr. Bill Blaikie:** Mr. Speaker, the member did not say anything yet and, as was said before, he did not really respond to the argument that I was making. Seeing that he did not respond to what

I had to say, I see no need to respond to something that I already responded to.

**Mr. Greg Thompson (Charlotte, PC):** Mr. Speaker, at the outset I want to thank the member for Macleod for introducing the motion. I want to tell all members of the House that we will definitely be supporting the motion because I think this debate on the floor of the House of Commons is overdue.

One thing I am amazed at, and other members have touched on it, is the Prime Minister suggesting that this is going to be a confidence vote. That is absolutely ridiculous. Obviously we all know what happens in a confidence vote if the government should lose, and I think the government would certainly be in a position to lose this one because it does not even have the support of its back benches. What is the Prime Minister doing? He is using the big stick to crack the backbenchers into line, forcing them to vote against the motion, even though in their own hearts most of them would certainly support it. Some of them have been brave enough to say that publicly.

Just imagine if the government did lose the vote and it decided to take it to the people in an election campaign.

Mr. Speaker, I am thinking of some of the campaign slogans of the past, but you are probably old enough to remember this one. Do you remember in 1972 when Prime Minister Trudeau campaigned on the theme that the land is strong? You are nodding in agreement. You remember that.

I do not know what the campaign slogan would be this time, but I imagine the basis of the campaign would be: "We are running on this. We want a mandate from the Canadian people to deny innocent victims of hepatitis C compensation".

Mr. Speaker, given your political past, do you believe that would be a tenable campaign position?

Mr. Speaker, you are absolutely right. I see you nodding in agreement.

**Some hon. members:** Oh, oh.

**Mr. Greg Thompson:** Mr. Speaker, that will probably be the only chuckle we will get out of this entire debate because that is not a tenable position.

Effectively we have 20,000 to 40,000 Canadians left outside the compensation package. The government does not know how many there are. In fact, the other day when questioning the Minister of Health he stood and admitted the government does not know how many people have been locked outside the package. It could be 20,000, it could be 40,000, it could be more. But the victims of hepatitis C are innocent victims. No one in their right mind could support that type of position in a country as historically generous as Canada.



*Supply*

We can imagine what will now happen is that the innocent victims will have to go through the courts to get compensation. They will have to go through the legal system to get compensation. That is their only recourse.

Every legal mind in the country and I think every member in the House will know that the government's position is pretty weak on this one. It cannot sustain its position in the courts. It will lose its case in the courts. When that happens the compensation package will be much bigger than what the government imagines.

The government is going to put these people through a protracted court process. At the end of the day some of the victims we are trying to help today will not be here because some of them are very, very sick. That is the sum of what we have been saying in the House.

The minister is in a very tricky situation. In the past in the House I have accused the Minister of Finance of being the real health minister because what is playing out on the Liberal front benches is obviously the jockeying for leadership. I do not think it is any secret that the Prime Minister is not going to be here forever. Of course, it will be his choice when he decides to open it up to a leadership race, but the leadership race, as we all well know, is already unofficially under way.

● (1140)

Now who we have jockeying for position is the health minister and the finance minister, the two we consider to be the front runners as unbiased observers of the Liberal Party.

The minister stands in the House and says "Listen, I went to cabinet, I fought the good fight and it is just unfortunate that I lost that fight in cabinet". Guess who he lost the fight to? The finance minister is the guy who is calling the shots.

When we point across here and put questions to the health minister we should in fact be talking to the Minister of Finance. He is the guy who is calling the shots. Unfortunately, the health minister is the weak link in the chain and he is taking the brunt of this decision.

When we talk about opening this package up and doing the right thing, the honourable thing, and re-examining this package in the hope that all victims would be compensated—and we want a straight yes or no answer—what does the minister do? He fudges on that answer. He does not say yes and he does not say no. Why? He does not dare. If he says "Yes, we'll open it up", zing, he is immediately gone. He is no longer in the front row. He is gone. He is history. If he says "No, we're not going to open it up", he is going to have the wrath of 30 million Canadians on him.

I think politics is being played out in the front benches of the Liberal Party, on the government side of the House. That is unfortunate because who are the victims in all of this? They are the

hepatitis C victims who have been left outside the package. That is unfortunate.

Before I finish I want to remind the House and all Canadians that the government found \$500 million to bail itself out of a botched helicopter deal. That was just the legal fees. That did not purchase one helicopter. I will remind the people around the country that it was just to buy itself out of a legal problem which it created.

It did not stop there. It did the same thing with Pearson airport. It got into difficulty there and it cost \$750 million to bail itself out of that botched deal.

It does not end there. The present Minister of Health was also the guy who brought in the gun registration bill. That cost the Canadian taxpayers another half a billion dollars.

The government is saying that it has a heart and it wants to do the right thing. We have the Prime Minister sitting over there nodding in agreement with the health minister. All the time this is playing out on the floor of the House of Commons, the only man who is smiling is the Minister of Finance. That is unfortunate.

Some of the hepatitis C victims and some of the leadership of the movement were asking me the other day, when the women from Ireland came over to press their case and to show us how it was done, what would have to happen in terms of parliamentary procedure. How would we proceed? What would have to happen?

I said it was very simple. In a parliamentary democracy the Prime Minister, when he enters this House, can rise in his place and say "Listen, we know we made a mistake. The honourable thing is to reopen this package and compensate all victims". It is as easy as that.

There is one person in this House who can change it. He can change it on a moment's notice. He does not have to put his caucus or even some of the cabinet ministers, who I know have reservations about this deal, through the meat grinder. He does not have to use a big stick to beat them into submission to support his position. All he has to do is do the honourable thing, rise in this House, get up on his hind legs and say "We have made a mistake. We are going to revisit this thing".

In the eyes of the international world, this is going to be a black eye for Canada. You know the history of this country as well as I do and probably better, Mr. Speaker. We know you are a student of history. This country cannot afford in the international world to make those types of cold, irrational decisions because we have always been a leader in terms of humanitarian aid to the rest of the world. All we are doing is asking that the same rules apply to us right here in Canada. Let us set the example and do it right here in this country.

● (1145)

Mr. Speaker, thank you for your patience. I will entertain questions from other members. Let this debate continue and on Tuesday night when we come into the House for the vote, hopefully

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the people on the other side of the aisle will do the right thing and support us in support of this motion.

**Mr. Joseph Volpe (Parliamentary Secretary to Minister of Health, Lib.):** Mr. Speaker, on such a serious topic as this I hope you will interrupt me if I engage in shameful partisan snipping. What I would like to do instead, contrary to the tone of some of the discussion so far, is to ask the member whether he has reviewed the facts as they stand before everyone, victims, assistants and members.

The member probably will recall that all victims have recourse to the courts. Very importantly, what is associated with that is that no action by the Government of Canada is taken to deprive people of an opportunity to seek compensation in the courts.

As I said to the previous speaker, the compensation package offered to a group of victims is dependent upon the accord of the courts. There has to be approval by the courts if the package is accepted. That does not preclude any other packages that may be sought afterward. It is an important distinction that makes members opposite feel uncomfortable. However, this is the case in a society where we have the rules of process determining everything that ought to happen.

If the member opposite wants to continue to speculate on the internal politics of all parties in this House, then that is a good way for him to determine the priorities of the people he would pretend to represent. From our side we have put something on the table which gives everyone an opportunity to consider it thoughtfully, deliberate and to make a decision. That does not exclude anyone. The rules of procedure allow everyone to seek satisfaction. The Government of Canada does not close the door on any of that.

**Mr. Jim Jones:** Mr. Speaker, on a point of order. Will the parliamentary secretary put his question? He has been going on long enough.

**The Deputy Speaker:** I have indicated that I wanted the question put or the comment ended. The hon. member for Charlotte.

**Mr. Greg Thompson:** Mr. Speaker, thank you for your wise intervention.

Simply it is cruel and unusual punishment for members to sit on this side of the House and listen to the parliamentary secretary rant on. He never addresses the motion before this House, which is compensation for the victims.

I am going to take his minister's own words and remind him that the minister stood in this House last fall and this spring, in fact just hours before the compensation package was announced, and led all of us to believe that the government was going to do the right

thing. He said he did not want these innocent victims to have to go through a lengthy and expensive protracted court procedure. We took the minister at his own words just hours before the compensation package was announced and he knowing full well that they would not be compensated.

I want to remind the Canadian people to stay tuned on Tuesday night and watch their members of parliament as to whether or not they will support this motion. We will support this motion because it is the right thing to do. We want all victims of hepatitis C compensated.

**Mr. Peter Stoffer (Sackville—Eastern Shore, NDP):** Mr. Speaker, I was very interested in the comments of the hon. member for Charlotte regarding the finance minister and who actually is running the health department.

I read in today's Quorum that David Dodge, the key architect of the finance department, is now a member of the health department. I would like his comments and views on that appointment.

• (1150)

**Mr. Greg Thompson:** Mr. Speaker, I lost part of that question. I know the member has been very complimentary in terms of his support. Specifically maybe one of the members could tell me exactly what he was asking because I was lost in the conversation.

**The Deputy Speaker:** Perhaps the hon. member could repeat his question more briefly. We have very limited time.

**Mr. Peter Stoffer:** Mr. Speaker, the hon. member for Charlotte had mentioned that the finance minister was running the health department. Today in the paper there is an announcement that David Dodge, a member of the finance department, is now the deputy minister of health. I would like his comments on that appointment please.

**Mr. Greg Thompson:** Mr. Speaker, I think we have all argued in this House that the decisions being made by the government in relation to this compensation package were made by accountants and lawyers. The human factor has to enter in here. I would rather see the minister bring in a psychiatrist, psychologist or counsellor of some sort rather than bean counters and more lawyers. The minister does need some administrative help but I think he needs more counselling than what he is probably getting.

**Mr. Maurice Vellacott (Wanuskewin, Ref.):** Mr. Speaker, this Liberal government has consistently stated how proud it is that Canada is the number one country in the world, the best nation in which to live.

I would like in a rhetorical fashion to ask a question of the Minister of Health if he is watching on CPAC today. If he were one who contracted hepatitis C in Canada and watched all the other

hepatitis C victims get fair and generous compensation, in other jurisdictions in the world as well, would he still believe in view of that comparison that Canada was the number one country in the world, the best nation in which to live?

I rise today to speak of the oppression and injustice and how these hepatitis C victims feel. They feel not like citizens of a first rate nation, the number one country in the world, but more like those of a third world country not having the compassion for innocent victims, especially when those innocent victims have been made so by the negligence of the government's regulators.

No doubt numerous letters, e-mails, correspondence and fax messages have been received by other members of parliament, as they have been by the Reform official opposition health critics. I would like to read into the record a couple of letters. I will read one in full and part of another. They simply reflect the outpouring of grief, the lament and great sense of injustice and oppression felt by these people who have contracted hepatitis C and those who contracted it before 1986.

This letter was addressed to me:

I am writing to beseech you to assist me in influencing the [health minister] to reconsider his position on the scandalous treatment of hepatitis C victims in his patently unfair compensation package.

I contracted hepatitis C while having a kidney removed in June of 1983. At that time, testing was indeed available for non-A, non-B hepatitis, testing which was not, however, being used in Canada. The date chosen, 1986, is entirely arbitrary. Germany began testing in 1981, the United States in 1986.

I find it rather interesting there was no new information, that nothing new entered the equation from 1981 to 1986 in terms of information that was not available in 1981. It is rather interesting as well that this government sometimes rants and rails at the American health care system yet chooses in this instance to take the lead from them. A very selective practice. The government is allowing the American practice in this case to dictate Canadian policy. There is no other good scientific reason for so doing. The letter continues:

As it usually happens, I was unaware of my disease until 1995, when my symptoms began to make themselves known and I was tested. Since then, my symptoms have increased dramatically, in spite of the many lifestyle changes I made in the hope of slowing down the progression of the disease.

I am now faced with the prospect of having to leave my beloved but challenging job as a result of my illness. I work at the University of Victoria, where there is no long term disability program, so I am faced with three months sick leave, then 15 weeks of medical unemployment insurance then—nothing!! The fear of how I will pay my bills is as stressful as the disease itself and I find myself becoming even sicker as a result of all the added stresses accompanying my inability to continue to work.

I will be attending the funeral on Tuesday, April 7, of Leslie Ashcroft, a close friend who died last Sunday of liver cancer. I know all too well what might await me as my disease progresses.

### Supply

The ultimate irony of this for me is that the [health minister] proposes to spend my tax dollars to compensate victims who were infected in the 'right' time frame whether they are sick or not. And I face the prospect of losing everything I have spent my life working for due to this same disease, contracted when there was testing which was not used, as I am now too ill to continue working and paying those taxes.

Please remember that, sick as many of us are, we can still vote and you can be sure we will not vote to re-elect a government that treated so many honest, hardworking Canadians in such an unconscionable manner lacking any compassion or, in fact, logic.

Where is the compassion of a government that deems that some victims 'deserve' compensation and others do not? Why have those of us infected before 1986 been doomed to litigation and hardship as a result—

• (1155 )

She concludes her letter with a plea and a heartfelt appeal to understand her situation and to do the right thing.

I also have a letter from a Canadian citizen, Vicki Anderson of Nanaimo, B.C. who was infected with hepatitis C through tainted blood. In her letter she asks whether the health minister would accept this compensation package if he were infected himself. It would be an interesting question if the minister were here on this occasion, but he is not. But if he were here and if he were one of those infected before 1986, would he accept being excluded from the compensation package?

**The Deputy Speaker:** I hate to interrupt the hon. member but he knows it is out of order to refer to the absence of members. I urge him to refrain from doing so.

**Mr. Maurice Vellacott:** In that case, it is the individual to whom I have just referred and to whom I cannot directly address the question. If he were infected with hepatitis C before 1986 would he accept being excluded from that compensation package?

The Liberals drone on about the should have, could have and would have. It is sickening. It is disgusting to hear that ring in our ears again and again, a track record like that. The minister's answers show that he cannot put himself in the shoes of those people. The minister needs to acknowledge that he has scarred the human side of what government is meant to be.

As Krever reports, the Red Cross was aware that non-A, non-B hepatitis was getting into the blood supply as early as 1978. The Red Cross rejected recommendations from its own people to implement surrogate tests in 1981, the ALT test that has already been referred to, and the 1984 anti-HBC test. A 1995 study in *The Lancet*, a prestigious and well respected medical journal, later revealed that the combined use of these two tests would have lowered the incidence of post-transfusion hep C by as much as 85%. From 1986 to 1990 the Red Cross was aware that the U.S.

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was using surrogate testing but did not implement or authorize its use in Canada.

The Prime Minister has admitted the government's direct liability yet he refuses to compensate. This reflects the continuing moral failure of this government. The health minister is the Prime Minister's hired gun, a lawyer using cold legal arguments to exclude victims who deserve compassion. The government meets flood and ice storm tragedies, "acts of God" for which it is not responsible. But this is the worst public health tragedy in Canadian history, for which the government is responsible, make no mistake.

The health minister says that he wants to keep the matter out of the courts but he is ready to drag up to 40,000 sick people into court. The health minister is prepared to spend millions of tax dollars to battle victims in court which will force sick people to use their remaining strength and financial resources to fight for what is rightfully theirs. The health minister is hypocritical in compensating some hepatitis C victims while compensating all AIDS tainted blood victims.

Since 1992 the feds have spent more than \$3 billion to help 40,000 fishermen who were thrown out of work, as they ought to, but the Liberals cannot bring themselves to help dying people, not people out of jobs. That is reason enough to help them. These are people not only out of jobs but out of their lives. They are dying people. When in opposition the Liberals called for compensation of all thalidomide victims, all HIV victims through tainted blood. Earlier the government compensated all who had urea formaldehyde foam insulation in their houses. Mr. Klein reversed his stand against compensating victims for sterilization programs in Alberta. Mr. Harris changed his mind with respect to Ontario's Dionne quintuplets. Why can the federal health minister not do the honourable thing, save face in some manner, do some supplementary program and compensate all victims?

• (1200)

After four years of public pressure, finally at long last Ireland did give generous compensation to its victims. But we have to wait four years in Canada, the supposed number one nation in the world, for that. It has already taken three years. How many more years will victims have to wait? If Ireland, a nation one-tenth the size of Canada, can afford to be generous to its victims, why cannot Canada?

The health minister says he wants to save the government money, but there are three class actions for \$5 billion against him already and more to come. If he really wants to help taxpayers he will settle out of court. The health minister claims if we compensate hepatitis C victims we would have to settle others, like victims of faulty breast implants. But those companies have settled with

16,000 Canadian breast implant victims for \$900 million. Each company owned up, faced responsibility and settled out of court. Why cannot the health minister do that?

Hepatitis C victims say the government's number of 40,000 is probably deliberately inflated. The Red Cross says half of that. What is the real number? There are number games being played to turn the Canadian public against the hepatitis C victims. Why is he doing that? The government should be giving compensation to all.

**Mr. Jim Hart (Okanagan—Coquihalla, Ref.):** Madam Speaker, I rise today on behalf of the constituents of Okanagan—Coquihalla to participate in this opposition motion to see that all victims who received tainted blood receive compensation as the Krever commission indicated was appropriate.

I am very discouraged by what I am hearing from the government side today, in particular from the parliamentary secretary who has been sent here to do a task, which I understand completely. But the task has been sent to do is to say that all victims do not and should not receive fair and adequate compensation because of the tainted blood they received through no fault of their own. I think this position is not a position that is held certainly on this side of the House and certainly by a majority of Canadians.

In January an Angus Reid poll concluded that 87% of Canadians agree that all victims of hepatitis C who received their blood through blood transfusions through no fault of their own should be compensated. This is not the position the Government of Canada has taken though. It has decided to take a very legal position, a position that could be argued is an accounting position. It certainly has not looked at the moral obligation of a government when it comes to compensation for these victims.

I heard the parliamentary secretary speak about the future of the blood system. Those are all good things. All Canadians hope that now the new system will be a better system and a good system so that we do not have to worry about that system. I thank the parliamentary secretary for talking about the future of a blood system.

What I would like to talk about today is the future of people. In particular I would like to talk about the future of a young person in my riding who is 13 years old. His name is Chase Makarenko. Chase is an interesting young fellow. At two and a half years of age it was discovered that young Chase had leukemia. He required extensive chemotherapy and many medical procedures. In 1987 his family was advised that he would need a blood transfusion. Note the date, 1987.

• (1205)

That leaves young Chase out of the compensation package. I would like the government to explain to Chase and his family why they are not included in this compensation package. It was not

Chase's fault. It was not the family's fault. It was a system that was regulated and controlled by the Governments of Canada that tainted the blood he received. Now Chase has an uncertain future.

Those are the futures we are talking about today, like young Chase who is 13. What does it mean at age 13 to find out that you have hepatitis C? Has anybody every considered the fact that you cannot a mortgage anymore? You cannot get a loan. You cannot go to the bank and go into business like other Canadians who do not have hepatitis C. Has any body considered that? Has the government considered that? I do not think so. If it has it has disregarded it. It has chosen to take a very firm position on this legal point and a date. It wants to draw a line in the sand.

I sat in this House and heard the Minister of Health say, before they announced the compensation package, that he did not want to see the victims of hepatitis C, of tainted blood, to spend their lives in court wrangling, going before judges and pleading their case. Now we are hearing that young Chase Makarenko, a 13 year old who received poisoned blood through not fault of his own, to get compensation will have to spend time in court. I do not understand that. I would like the government to explain that to me. I have been sent here by the people of my riding to get answers from this government and to ask questions.

I met with the hepatitis C victims of Okanagan—Coquihalla last week. I have a lot of questions. I have a lot of heart wrenching stories. The Minister of Health does not want to meet with those victims. The Minister of Health does not want to meet with young Chase Makarenko from Peachland, B.C. who finds himself in this unenviable position. It is a sad day for Canadians.

It is a very sad day when we can say to the producers of maple syrup that they deserve compensation because we had an ice storm. It was a tragic event and maybe they should receive compensation. I am not arguing that. We have seen so many things like the Red River flood. Do those people deserve compensation? Yes. But does 13 year old Chase Makarenko of Peachland not deserve compensation? I would argue and debate with anyone who wants to debate it with me that he does. So do the other victims who received poisoned blood. It was not their fault.

I urge all members to think about Chase and the other victims who unfortunately do not fall into the compensation package outlined by this government.

In conclusion I would like to read the letter I received from Mrs. Makarenko: "I ask you, would you like to step in his shoes or try to walk for the next 13 years with him? I would rather doubt it. You would not be able to understand or handle the pain, the suffering, the questions, the uncertainty, the medical procedures, the discrimination and the costs. I believe each and every one of you would pass on this gift of life".

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Then she does the most amazing thing. She thanks the parliamentarians and the government for the time we took to read her letter. She says it is greatly appreciated. She ends with thank you and a signature.

• (1210)

I hope we can have some compassion in this House and say the decision was wrong and unfair and Chase will be able to live as normal a life as he can.

Therefore I urge this House, whenever the vote comes up, to please support Chase and the other victims of hepatitis C.

**Mr. Joseph Volpe (Parliamentary Secretary to Minister of Health, Lib.):** Madam Speaker, I find, as usual, that a debate on such a sensitive and emotional issue requires very careful reflection. I am moved, as I am sure all other members are, by the example of Chase and others. I have a very close friend in my riding who is a cause for some serious concern.

I think the debate would be helped along by recalling a couple of things. If I am wrong perhaps the member opposite will correct me. First, the offer that is proffered for victims to consider is based on the acceptance that those who were infected at a time when governments could have done something different and did not, that this is a case where they ought to then come forward with a package similar to the one that we have addressed.

Second, perhaps in this specific case it might be worthwhile to remember that 1987, if I heard the member correctly, is a date that is included in that particular package.

**Mr. Maurice Vellacott:** Madam Speaker, I rise on a point of order. If the member has a question he should get to the question instead of going into all this material he never got through before. If he can preface his remarks and get to his question, I think that is the point of the questions.

**Mr. Joseph Volpe:** Madam Speaker, I know you will accept that this is a time for questions and/or comments. I wanted to reflect on the date that the member gave us in his presentation. It was a good presentation and one that deserves consideration by all members. I was trying to be helpful by giving an indication that 1987 falls within those parameters. If I did not hear that correctly or if there is an error then it might be helpful to the people concerned to correct that. I do not mean this to be trivial or partisan. It is an important thing to keep in mind.

**Mr. Jim Hart:** Madam Speaker, the question again goes to the problem that the government is having with dates. The point here is that the date does not matter. It is arbitrary. It is a legal argument.

I thank the parliamentary secretary, who has been sent here to be a marionette today for the minister, for again stressing my point

*Supply*

that the date does not matter. Young Chase was infected in 1987. Does it matter if he was infected in 1986, 1985, 1984 or 1980? Why should it matter? Can he explain that to me?

Today we heard from a medical doctor on this side of the House who said that he has practised for some 25 years. He said there was testing available in 1958. Why did the government not choose to take 1958 as the date? The fact is it is an arbitrary date.

I question the member as well on the government's inflated figures of some 50,000 people. The member wants to ask me questions about a date I gave him. We have questions to ask him about the dates he has given us.

• (1215)

**Mr. Maurice Vellacott (Wanuskewin, Ref.):** Madam Speaker, how does the member who has just spoken feel about the fact that the government would rather give grants of millions of dollars to replace tobacco company sponsorship than compensate the victims of its own negligence?

**Mr. Jim Hart:** Madam Speaker, I touched on this point a little in my presentation. It seems other things that would appear to be more politically sensitive in the lives of Canadians have more importance to the government and the parliamentary secretary. It is a terrible shame.

I would hope to see the government move like the Irish government did. Now would be the time to do it because this government's decision is wrong. It is just wrong. It is morally wrong, but it has the power, the opportunity and the ability.

My arguments today focused on a young person who is in a terrible situation. The government should reflect on such people. Members of the Liberal Party should reflect on such people.

On Tuesday night when everyone stands to vote the majority of Canadians will be with this side of the House and not with the Government of Canada, which will tell its elected members of parliament to act like the parliamentary secretary has acted today, like a marionette for the Government of Canada and the Prime Minister.

**Mr. Lynn Myers (Waterloo—Wellington, Lib.):** Madam Speaker, I will be sharing my time with the Parliamentary Secretary to the Prime Minister. I thank you for providing me with the opportunity to participate in this very difficult debate.

Governments created the Krever commission to examine all the information, to hear from many witnesses and to report on findings of fact about the blood tragedy of the 1980s. Justice Krever's final report is a comprehensive and exhaustive examination of the

events. He recognizes the significance of the period 1986 to 1990 as a time when the Canadian blood system could have responded better with appropriate risk reduction measures.

After fully examining the facts Justice Krever advised us that rather than waiting for full scientific proof the Canadian Red Cross could and should have acted in a way similar to what occurred in the United States in 1986.

On the issue of the blood supply in general there can be no doubt of the government's continuing strong commitment to resolving the problems associated with Canada's blood system and to restoring public confidence. We fully understand the need to take appropriate action to rebuild public confidence in the blood supplies.

Any solutions must be governed by three principles. First, the safety of the blood supply must always come first. Second, a fully integrated approach is essential. Third, accountabilities must be clear and the system must be transparent.

The key to success lies in the proper governance of the system. That means we need an effective system of accountabilities, management structures and processes that control the safe supply and use of blood and blood products.

As we move toward a new system for regulating and safeguarding Canada's blood supply, it is important that we discuss thoroughly the details of the new system.

Questions have been raised about the role of the regulator during the transition of responsibilities for governance to the Canadian blood services. Let me review some of the basics.

The regulator's role is to set the standards for safety of the blood system and to ensure that they are met. Over the past several years Health Canada has taken decisive action to improve blood safety, and blood safety will continue to be a priority for the department in the future.

Health Canada regulates the collection and manufacturing of blood and blood products. Health Canada has a comprehensive approach to improvement calling for co-ordinated initiatives in many different parts of the department with the cumulative effect of overall strengthening and improving the blood system safety.

Health Canada is involved in strengthening standard setting and inspection of the blood system, in improving the development of test kits used in blood safety and in facilitating public health intelligence with an emphasis on bettering blood science.

Each of the individual improvements noted contributes in its own way to ensuring that Canadians continue to have a supply of safe, effective blood and blood products when they are required.

*Supply*

• (1220)

The regulator must provide guidance to the operator on how to meet these requirements. Health Canada is in the process of developing guidelines on the regulatory requirements for blood establishments.

Health Canada is also working with the blood transition bureau to advise on regulatory issues during this transition and is working closely with the bureau to communicate regulatory requirements.

Health Canada will also continue to provide guidance to the blood transition bureau and will evaluate any submissions according to established standards.

These are urgent matters and Health Canada fully recognizes that urgency. It has therefore made a strong commitment to give such evaluations top priority. Health Canada has undertaken a major initiative to improve the surveillance and investigative capacity of Canada's public health system. Blood science and blood borne infections, old and newly emerging ones, are at the forefront of this initiative.

The department is building the capacity to answer basic medical and scientific questions by taking an approach guided by principles of consensus building, priority setting, expertise and strong national and international linkages.

Health Canada has established a blood borne pathogens unit to carry out consensus planning, development surveillance, investigation programs, design projects and activities to address the needs that are identified.

Health Canada is building a network of experts and information to include federal, provincial, academic, professional, clinical and public communities to focus the extensive research capacity that exists in Canada on the demanding questions that remain in the blood system.

The goal is to co-ordinate a consortium of research agencies in Canada, including the Medical Research Council, National Defence, Health Canada's national health research and development program, the National Research Council, the Networks of Centres for Excellence and the private sector so that priority applied research agendas for blood borne pathogens can be developed.

This strategy of consensus building will help all partners move beyond collaboration toward total commitment and achieve consensus answers to urgent questions about blood borne diseases.

The department is forging strong international links to ensure that Canada's public health intelligence keeps pace with developments in other parts of the world, putting Canada's various health protection partners in a strong position to trigger effective scientific action.

Over the past several years Health Canada has proven by its actions in areas which fall under its responsibility that it is committed to keeping Canada's blood system safe and of the highest quality.

The year 2000 problem, a central information management issue facing many organizations, is being addressed diligently through several contingency plans. Health Canada has also made a commitment to expediting reviews of information related to the implementation of the year 2000 compliant system.

The initiative of Canada's governments to take action on the national blood system marks an important mutual commitment to achieve a common goal, and that is ensuring the safety of the Canadian blood system and supply.

Health Canada carefully monitors developments at all levels in the blood system. The department will continue to regulate any changes that fall within its jurisdiction. It will take the lead to direct changes which in its view will further strengthen that system.

In his interim report Justice Krever advised Canadians that "safety is an absence of risk". He also said "safety is an absolute and can never be achieved". Health Canada believes that all of partners and participants in the national blood system have to strive constantly to reduce health risks and ensure the blood supply is as safe as it can be.

The department has shown leadership on blood safety and it will continue to take an aggressive leadership role in making Canada's national blood system second to none.

We can see from this brief review that Health Canada is taking the necessary steps to ensure that the transition to a new blood system is smooth and successful, and that we will have a system in which all Canadians can have confidence.

**Mr. Darrel Stinson (Okanagan—Shuswap, Ref.):** Madam Speaker, I listened to the member's speech. He was talking about now and in the future. What we are talking about is compensation for the victims who were infected through a system that was supported by the federal government of the day.

• (1225)

I have a question for the member. Can he stand in the House today and say that he does not believe the victims before 1986 should be duly compensated?

**Mr. Lynn Myers:** Madam Speaker, I thank the hon. member for his question.

As he knows, as all members of the House know, and indeed as all Canadians know, this is a very difficult decision. This is a very tough decision. This is a decision fraught with a great deal of emotion. It is clear that it strikes at the heart of all Canadians. We very much appreciate that.

*Supply*

The point is, though, on tough decisions like this one sometimes tough decisions have to be taken. An issue like this one sometimes requires that tough public policy decisions be taken in a manner that I think is fitting with what the majority of Canadians believe.

In answer to the hon. member's question I simply want to say a tough issue like this one sometimes requires tough decisions but is in the interest of the broader public policy.

**Mr. Rey D. Pagtakhan (Parliamentary Secretary to Prime Minister, Lib.):** Madam Speaker, the motion before us states:

That this House urges the government to act on the recommendation of Justice Horace Krever to compensate all victims who contracted Hepatitis C from tainted blood.

The motion raises fundamental questions and merits careful and thoughtful analysis, but let me say at the outset that as a physician before I became a member of parliament I share the pain and anguish of all patients with hepatitis C. In fact I have always shared that philosophy as a medical doctor.

The compensation package announced jointly by the federal, provincial and territorial governments last March 27 for Canadians infected with hepatitis C through the Canadian blood system from January 1, 1986 to July 1, 1990 amounted to \$1.1 billion: \$300 million from the provinces and territories and \$800 million from the federal government. The federal contribution represents 73% of the total compensation package.

Let me at once say that the government has not abandoned hepatitis C patients infected before and after this period, just as we would not abandon other patients whose diseases are also a result of treatment procedures, which always carry elements of risk. Our health care system will continue to look after them as the various levels of government across the country are committed to deliver the health care service we are proud of.

We will continue to be imaginative and perhaps we can challenge the Medical Research Council of Canada to conduct focus research to accelerate the discovery of a treatment for hepatitis C, to challenge our medical scientists and to provide them with the resources to do the particular type of research.

I am confident that provincial and territorial governments across the land will not sit idly by. They will be challenged even more to hasten their positive considerations of enhancing home care and pharmacare programs that will benefit hepatitis C patients as well as all other patients suffering from any type of illness.

The motion before us suggests that we should adopt the recommendation of Justice Krever to implement a no fault scheme for this group of patients with hepatitis C. Let me call to the attention of the House that Mr. Justice Krever made this recommendation for hepatitis C patients not because he did not care or neglected other

non-hepatitis patients. Mr. Krever in fact made this recommendation for hepatitis C patients only because, as he said in his report on page 1045:

I acknowledge the force of argument made by among others the Pritchard Report that it is difficult to treat blood related injury compensation differently from compensation for other health care injuries. Given my terms of reference, however, it is not for me, here, to consider for any injuries other than those that are related to blood therapy.

• (1230 )

It is clear from this statement by Justice Krever that what Justice Krever was suggesting was a no fault scheme not only to compensate patients with hepatitis C but also non-hepatitis C patients as long as their diseases are a consequence of tainted blood.

Earlier this morning I heard arguments from the opposition that it will not open the floodgates as though they were arguing that let us not worry about the other kind of patients. Let me state very clearly that even Justice Krever would like a no fault scheme for all those other types of patients without hepatitis C. Justice Krever said so in his concluding statement also on page 1045 in chapter 39 entitled "Financial Assistance For Blood Associated Injury" of his report:

I recommend that, without delay, the provinces and territories devise statutory no fault schemes for compensating persons who suffer serious adverse consequences as a result of the administration of blood components or blood products.

Canadians will note from that quotation, and we in this House have a duty to particularly make this observation, that Justice Krever's challenge for such a plan is addressed to the provincial and territorial governments. He did not include the challenge in the challenge to the federal government as quoted in his report. The basis for this argument is to reduce the impact of blood related tragedy on Canadian citizens "to give some thought to the question of appropriate relief for those affected by the inevitable events".

I am inclined to support such a recommendation. I am persuaded that in our current legal system the primary mechanism for compensating someone who has been harmed through the fault of others is a civil action for damages and that those in breach of duty to exercise reasonable care resulting in harm are negligent and therefore have a duty to pay. That civil tort process is a lengthy one.

I must underscore again that Justice Krever's recommendation is for all types of patients, not only hepatitis C patients who suffered injury as a result of the administration of blood components or blood products.

This House has not made a policy decision on this fundamental recommendation of Justice Krever. To make a no fault policy change only for hepatitis C patients, desirable as it might be from my perspective or from the perspective of others, is premature and would be unthoughtful of other non-hepatitis C patients equally



injured by the blood system and perhaps injured by treatment procedures other than through the blood system. We have not in this House held that debate.

If members opposite would only be respectful and listen to the debate I am quoting from Justice Krever hopefully they will gain some pearls of wisdom. When they are worried about the rationale of this debate they begin to distract me but they cannot distract this member of parliament because the truth speaks for itself.

We cannot be selective for hepatitis C patients only because this is the group of patients who have captured the public consciousness at this time. Where were they before? Did we hear from the opposition before on this issue?

Let me come to the testing of blood donation for alanine aminotransferase, ALT, as noted in Justice Krever's report, volume I. The use of ALT to reduce the incidence of post-transfusion non-A, non-B hepatitis, most of which would later prove to be what we now know as hepatitis C, by 40% was first reported by the *New England Journal of Medicine* in April 1981.

• (1235)

But in June of the same year the Krever report stated: "The United States National Heart, Lung and Blood Institute's ad hoc committee on ALT testing recommended against the implementation of ALT testing in favour of further study of its efficacy".

It was only in February 1986 in the same report that: "The United States Food and Drug Administration's blood products advisory committee recommended that all blood donations for transfusion be tested for both ALT and anti-HBc, an antibody to the core of the hepatitis B virus, as surrogate, that is substitute, tests for non-A and non-B hepatitis".

Madam Speaker, since my colleague shared his time with me and he only used seven minutes, perhaps you can give me the additional three minutes beyond my time.

I should also note from Justice Krever's report that it was only in July 1984 that the German regulatory authorities required that all products distributed for use in Germany be manufactured from ALT tested plasma.

Consideration of ALT testing in Canada had not been ignored. But Justice Krever noted in his report the editorial in the December 1984 issue of the *Annals of Internal Medicine* by Dr. Alter and Dr. Holland who were investigators in the United States National Institute of Health study, and I quote from his report on page 642: "They did not, however, endorse the recommendation that ALT testing be implemented, and they said that the true efficacy of surrogate testing could be proved only by a randomised trial that

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compared tested and untested blood. By 1986, however, no such study had been undertaken".

I would like to get unanimous consent to continue.

**The Acting Speaker (Ms. Thibeault):** Is there unanimous consent?

**Some hon. members:** No.

**Mr. Grant Hill (MacLeod, Ref.):** Madam Speaker, my colleague is a medical practitioner from days of old, as I am. He has chosen to look at the specific issue of the ALT testing, when it was and when it was not available. That is a debatable question.

The government's main argument for not going down this road is that a precedent would be established that would cause an outpouring of frivolous medical claims. Since the precedents of HIV sit in front of Canadians and since the precedents of compensation for thalidomide sit in front of Canadians, does the member see any evidence of an outpouring of frivolous medical malpractice claims because of those compensation programs or can he find any evidence in international experience of such a precedent setting case showing an outpouring of frivolity when it comes to medical malpractice?

**Mr. Rey D. Pagtakhan:** Madam Speaker, when I develop public policy and participate in that process, a more fundamental question is not whether because there will be no floodgate of other cases we can do this for this group of patients. A more fundamental medical question requiring the utmost humanity is to consider all patients equally whether they seek damages or not. That is why the recommendation of no fault by Justice Krever to me is persuasive. But my submission is that the motion before us is premature because it is only focused on a group of patients, not on all other patients equally harmed by blood treatment.

Medical situations are complex and require a rational basis at all times. It is always a tenuous balance between risk and benefit. So I must say that the scientists of the day face a serious dilemma. But let me say in reply to the question that the compensation package announced by the territorial, provincial and federal governments is a response based on careful, sensitive and thoughtful considerations of all the facts and information at hand.

I know that no value of compensation can extinguish the pain and agony of all patients, whether they are included in the compensation package or not. I share their pain and their anguish, as my medical colleagues and other members of Parliament do. But I remain confident that they will understand this announcement was based on a public policy that is thoughtful and careful and fair.

• (1240)

I repeat, the motion before us pre-empts a thorough and careful debate on the whole issue of a statutory no fault scheme for compensating persons who suffer other serious consequences as a

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result of the administration of blood components or blood products as recommended by Justice Krever or, for that matter, as a result of other treatment, not necessarily blood components or blood products.

That is why in specific response to the question of my medical colleague, now a colleague in parliament, it is not so much the worry about the floodgate of cases, important as it may be. We should consider all patients, even those without hepatitis C. For the opposition to now say we must compensate patients with hepatitis C because they suffered blood related injury, but not those other patients—

**Mr. Peter Stoffer:** Madam Speaker, I rise on a point of order. The hon. member from Reform asked him a pointed question. In the interest of time, the Parliamentary Secretary to the Prime Minister should give a pointed response so that other colleagues can ask questions as well.

**Mr. Rey D. Pagtakhan:** Madam Speaker, if the member was listening he would have understood that I was answering the question pointedly. The question can be answered pointedly in the context of the greater whole. We cannot be simplistic in medicine. I understand his difficulty, but unfortunately the member was trying to be simplistic in his approach. Life is not a simple entity.

**Mr. Jay Hill (Prince George—Peace River, Ref.):** Madam Speaker, I wish at the outset I could say it is a pleasure to rise today to address this issue. I am afraid I cannot. In fact, it is a bloody disgrace what has happened in this country.

This government has made what it deems a firm decision and is sticking to that position. I certainly agree with my hon. colleague from the NDP who raised the point of order that the hon. parliamentary secretary has decided to finish his speech instead of addressing the question so aptly put to him by my colleague from Macleod.

I too had intended to ask the parliamentary secretary a question. The hypocrisy of the hon. member is incredible. Back in 1993—

**Mr. Rey D. Pagtakhan:** Mr. Speaker, I rise on a point of order. On a very sensitive issue like this, I was told in high school that in the rules of debate when you become personal you have lost the argument.

**The Deputy Speaker:** I do not think that is a point of order. I think it is a matter of debate.

**Mr. Jay Hill:** Mr. Speaker, what I was about to point out when the parliamentary secretary intervened with his bogus point of order was that when he sat as vice chair on a special subcommittee he was quite effusive on the fact that all victims of HIV, regardless

of when they contracted the disease, should be compensated. Now he stands in his place today with a completely different story because the victims happen to have hepatitis C. If that is not hypocrisy I do not know what is.

Sitting in this Chamber and listening to the debate today, I have heard about all the legal and bureaucratic answers that I care to. It is at times like this that I am convinced there are far too many lawyers sitting on the other side, too many lawyers concerned about the many legalities, concerned about setting a dangerous precedent, concerned about the dollars and cents. They are worried about the bottom line rather than being willing to do what is right, because this is the right thing to do. This government damn well knows it.

• (1245 )

Because I am splitting my time with my hon. colleague from Saanich—Gulf Islands, I do not have a lot of time left for my presentation today. However, in the time I have left I would like to read into the record just one of the many letters that I have received as the member of parliament for Prince George—Peace River. I believe that this particular letter speaks for the tens of thousands of innocent hepatitis C victims whose only fault was that of trust. They trusted that the blood system in Canada was safe.

This letter was written on April 21 of this year. It reads:

Mr. Hill,

I am writing to express my appreciation for the article you wrote for the *Alaska Highway News* on April 20, 1998 titled "Grits' health care policies a bloody disgrace".

On February 26, 1997, I found out that I was infected with Hepatitis C from blood received after the birth of my son on September 27, 1982.

My life has not been the same since. Each day is a challenge, dealing with extreme pain, exhaustive fatigue, constant medications and the frustration of being forced to change my life because I can no longer live the active lifestyle I enjoyed.

Besides the physical manifestations of Hepatitis C, many people are unaware of the emotional havoc such an illness wreaks. It has been a constant strain on relationships with my family and friends. I daily face my partner's pain and frustration at watching my physical health deteriorate and my emotional battle with the frustration of feeling so angry and helpless over my lack of control of how this disease is affecting my life.

Last October, I had to send my 15 year old son to live with his father in Vancouver because I am concerned about him having time to adjust to his new living situation while I am still alive. I have talked to him about the pride and joy I felt at his birth but it breaks my heart to still see him feeling guilty, like his birth is causing my death. My 18 year old daughter has moved back in with me to help provide physical and emotional support.

My mother, who lives in Manitoba, can't speak to me on the telephone without crying. Her faith and prayers have been an inspiration to me. My brother died of cancer on October 26, 1997. I held his hand as he died, him promising to be there to meet me on the other side soon. I miss the close relationships I had with my sisters. They have stopped confiding in me because they feel I can't handle any more "on my plate".

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I have learned that learning you have Hepatitis C is difficult for many others to handle. I am blessed with supportive close friends but other friends and acquaintances don't call any more. I am sure you are quite aware of how fast "word of mouth" travels in a community the size of ours. I also realize that many people are ignorant and afraid of Hepatitis C and its transmission. But that isn't much consolation for the pain of feeling like a "leper", when others in the community cross the street to avoid being close to you or put themselves between you and their children.

All that is enough, without the feelings of being a burden to family, worrying about how I can financially manage yet another trip to Vancouver for health care, how my children will manage their further education without my support and the constant sense of frustration at no longer being able to work, for the financial and self-esteem benefits of feeling like a contributing member of society.

In the Peace River area, we also have to contend with the expenses of travelling to major centres for medical care. I am trying to see the bright side of that, by knowing I can see my son when I have to travel to Vancouver for medical care. My limited income because of my inability to work and the expenses of my travel have prevented me from being able to pay for his travel to visit Fort St. John during his Christmas holidays and Spring Break. I had no choice in this situation. I have joined a class action lawsuit because I have been forced into a situation of having to fight for compensation.

I want to also express my sincere appreciation of your speaking up for my compensation rights when I feel my weakest.

If you wish to truly represent me in Ottawa, please continue to push for compensation for ALL Hepatitis C victims.

And if you have a chance to speak to [the Health Minister], please ask him to explain to my children how come their mother's life is not considered as valuable as another's.

• (1250)

I talked to this young mother last night on the telephone from my home here in Ottawa and, while she agreed to let me read this letter because I felt so strongly about it, as it did express the views of so many, tens of thousands of victims, she did ask that her name be kept confidential out of respect for the privacy of her children.

I know my two constituency assistants in Fort St. John are watching this debate today. Every day it seems they hear from people like the author of this letter, innocent victims who phone, fax, e-mail and drop by my constituency office. There is nothing that they nor I can do to really help these victims. They certainly lend a sympathetic ear and I try to be the voice of those victims in Ottawa. Other than that there is precious little we can do to ease the suffering.

The reality is that it is up to the people on the other side of this House to do something to ease that suffering. It is up to the health minister and the Prime Minister. When the vote comes down on this motion to compensate all the victims that have received this terrible disease through tainted blood, it is up to the backbench Liberals to break ranks and vote with their conscience and with their heart. For God's sake vote for these victims.

**Mr. Greg Thompson (Charlotte, PC):** Mr. Speaker, I want to commend the member for Prince George—Peace River on a great speech. He is absolutely right, in terms of the Parliamentary Secretary to the Prime Minister who is in the Chamber.

The point I want to make is simply this. It brings out the worst in members of parliament when they are not allowed to vote freely on an issue which rests solely on the conscience of the member. I want to remind the Canadian people, and I know the member for Prince George—Peace River knows this, that the parliamentary secretary when he was a member of the health committee in 1993 wrote a dissenting report recommending that an inquiry into the tainted blood scandal be launched. That was done. Justice Krever has reported and now the parliamentary secretary is denying the very thing he supported.

I guess in the real world we would call that swallowing yourself whole. The parliamentary secretary swallowed himself whole on this one. Unfortunately that is because the Prime Minister is holding the big stick over him because he happens to be the Parliamentary Secretary to the Prime Minister of Canada. Sadly, there are only about two of them who showed up today to debate this: the parliamentary secretary to the health minister, who is waving the big stick over him, and the Parliamentary Secretary to the Prime Minister.

I would like the member for Prince George—Peace River to comment on the presence of these two and the outrageous defence of the indefensible. Perhaps the member could comment on that.

• (1255)

**Mr. Rey D. Pagtakhan:** Mr. Speaker, I rise on a point of order. Would you not find it more in order that the person alluded to in the question is the person to respond?

**The Deputy Speaker:** I think the hon. member knows that in questions or comments the questions or comments are supposed to be on the speech of the member who has just spoken. I think, in this case, the hon. member for Charlotte, with great respect, did refer to the speech of the hon. member for Prince George—Bulkley Valley.

Of course, the parliamentary secretary, unfortunately for him, was the subject of discussion in both speeches.

**Mr. Jay Hill:** Mr. Speaker, unfortunately the hon. member is quite correct. Issues such as this and debates such as this bring out the worst in some members. I guess, to offset that, it brings out the best in some members.

We can clearly see today by the comments which have been made and by the speeches, some great speeches, where people's hearts are on this issue.

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The government can continue to display the hypocrisy it displayed in the past. It can continue to hold firm to this position of two tiered victims of tainted blood, or it can do what is right. It has the opportunity to do what is right.

The Parliamentary Secretary to the Prime Minister in his speech suggested that to compensate all hepatitis C victims who got their disease from tainted blood is premature. That is what he said, not once but two or three times during his presentation. I would like him to face some of these victims, look them in the eye and tell them that it is premature.

**Mr. Peter Stoffer (Sackville—Eastern Shore, NDP):** Mr. Speaker, I commend the hon. member for his wonderful speech.

The question I have is that the new deputy minister for health apparently will be Mr. David Dodge. I am quoting directly: "There are more important things here than money". Will he not agree that obviously this government has boiled this entire compensation package down to resources and finances only?

**Mr. Jay Hill:** Mr. Speaker, I appreciate the kind comments of both colleagues who commended me for my speech, but I would like to note for the record that almost my entire speech consisted of a letter from a young mother in my riding. It is she who should get the credit, not myself.

The member is quite right. In the column that I wrote in the local papers in my riding I alluded to the fact that this government can find millions of dollars to cover up its ineptitude.

It can find, for example, \$500 million for the cancellation of the EH-101 helicopters; \$60 million in an outright lawsuit decision for the Pearson airport cancellation; \$2 million because it decided to go on a witch hunt against a former prime minister and it had to pay his legal bills.

There is example after example that the opposition and the general public can find where the government seems to be able to find hundreds of millions of dollars, but it cannot compensate all the victims. It is worried about a precedent? Do what is right.

**Mr. Rey D. Pagtakhan (Parliamentary Secretary to Prime Minister, Lib.):** Mr. Speaker, I rise on a point of order. I would like to seek unanimous consent in the interests of fairness and justice. Since they alluded to my name, Mr. Speaker, can they provide me with a two-minute response to their questions?

**The Deputy Speaker:** Does the House give its consent?

**Some hon. members:** No.

**The Deputy Speaker:** I am sorry, there is no consent. That disposes of the point of order.

**Mr. Jay Hill:** Mr. Speaker, I rise on a point of order. I would like to express that you as the Speaker begin to rule on these bogus points of order, including my own.

**The Deputy Speaker:** I have always been mindful to get up and make a ruling after hearing a point of order, bogus or otherwise. The hon. parliamentary secretary is seeking to do what the hon. member just did, that is, to make some interjection in the debate under the guise of a point of order.

• (1300)

In fairness to members, the Chair likes to give members an opportunity to express their views and we hear before ruling whether or not there is a point. Clearly, there was not in either case. But the member did ask for consent, which was denied, and that is fair.

**Mr. Gary Lunn (Saanich—Gulf Islands, Ref.):** Mr. Speaker, I rise today on behalf of the constituents of Saanich—Gulf Islands to speak on this very important issue brought forward by my colleague the member for Macleod.

I have been following the debate in my office. We have heard a lot of heart wrenching testimonies. It is very important that we listen to them but that we also listen to our moral conscience, listen to our constituents, and do what is right.

I have letters which I am going to bring into the debate, but I am going to start off with what needs to be done as right. I am really frustrated at what this government is doing.

Let me read from an article in the April 23 issue of the *Toronto Star*. These are the tactics the Prime Minister has brought himself down to in this debate, and I say has brought himself down to: "the Prime Minister declared a vote on a Reform Party motion expected early next week to be a vote of confidence in his government". What he is really doing here is bringing out a big hammer. He is telling all of his backbenchers that they will do as they are told.

This vote has been declared a whipped vote by the government. I got that from one of the Liberal members. A whipped vote means the government will pull every single stop to make sure that every single member votes with the government. I do not believe we will see any members on that side vote against. There will be a few who will have the courage to stay out of the House.

When members are forced to vote against the wishes of their constituents and against their own moral conscience, when they are ordered, not told but ordered how to vote, that is called a dictatorship. That is exactly what the Prime Minister is doing in this situation. He is ordering his members what to do.

It is really ironic and this is just a coincidence, but where is the Prime Minister going to be when we vote? Where is the Prime Minister going to be next Tuesday? He is going to be in Cuba. How ironic. The Prime Minister is going to be in Cuba and he is dictating to his members on how to vote.

I know the Prime Minister believes in democracy. He has expressed that to us and I believe that he does. But I think his tunnel vision on this issue is so narrow that he does not even realize he is dictating to the worst extremes.

We have heard from some of the Liberal backbenchers how frustrated they are with the government. For the government now to pull all the stops out and force this issue is absolutely wrong. It goes against all the principles of democracy, people's own moral conscience and the wishes of members' constituents to be ordered for political reasons by the Prime Minister. To do this is absolutely dead wrong. They will have to look at themselves in the mirror, as will the Prime Minister.

Let us get on to the issue of the hepatitis C victims. I want to quote from Justice Krever's recommendations:

Until now, our treatment of the blood-injured has been unequal—. Compensating some needy sufferers and not others cannot, in my opinion, be justified.

I do not know how much clearer we can get than that.

I know an arbitrary date has been drawn in the sand. From everything that I have read, there was a test available. I have heard members on the other side argue that the United States did not start their testing until 1986. My question is since when especially in our health care system, do we have to follow the lead of the United States? We make decisions on our own. That is absolutely the worst kind of argument and it shows the government is grasping at straws.

• (1305)

I will read parts of a letter. I will not read the entire letter because I do not have time. A constituent, Mrs. Betty Back of Victoria, wrote this letter to me. In 1997 the Red Cross told her that she had hepatitis C. She writes: "This came as quite a shock because I did not know I had been given a transfusion". Because of the complications from a hip operation, Mrs. Back had to undergo numerous operations between 1983 and 1997. She raised the point that she has no idea when she was infected. She has no idea when she was injected with poisonous blood, none whatsoever.

Again I quote: "I don't know what our government proposes to do. There should be no guidelines as to if a person was infected in the 1970s, 1980s or 1990s. I have hepatitis C and I got infected from a blood transfusion. There is no cure. Transfusions were meant to save lives, not kill them, and kill it does. No one but no one should be discriminated against". That is exactly what this

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government is doing. It is cutting her off. There will be no evidence to indicate when she got hepatitis C.

Her point is exactly what we are debating. We cannot just draw a line in the sand. We know these tests were available. The evidence is out there. In my research I have seen different dates. All kinds of dates are thrown in here. My conclusion is that in the early eighties, at least 1980 or 1981, without question there were tests available and other tests were available before that.

I understand that all four opposition parties have left the partisan politics out of the issue. They are doing what is right, members from one corner of this country to the other. I know there are members from the other side who would wish to join in that as well, but of course they have been dictated to by the Prime Minister. They have been ordered. I see the smiles. To me that is more serious in itself than the issue we are dealing with. Today I spoke to one of the members who explained the level of orders they are receiving on this. The Prime Minister is concerned. He is treating this as a confidence vote.

Let us talk about confidence votes. I agree with the Prime Minister that this is a confidence vote but not in the same way he means it. I am not suggesting this will bring down the government at all. This is a vote about the confidence of the people of Canada. The Prime Minister has an opportunity to do the right thing. It is never ever too late to right a wrong. He could come into the House today and say "We have made a wrong decision here and we are going to correct it". I hope he does.

I hope the Prime Minister is following this debate and listening to the arguments. If he is, I am sure he will have to do that. I do not see how anybody could not follow this debate and not come in and correct that wrong. That is the only way he will gain the confidence of the people of Canada. This is about confidence.

This government is losing that confidence. It is related not only to the hepatitis C issue and the government's failure to compensate some victims, which would be the right thing to do, but also to the issue of democracy. If the Prime Minister continues to run a government that dictates instead of allows the people on that side of the House to represent their constituents, they will be receiving calls all weekend on this.

I ask the government to reconsider. I ask the Prime Minister to make the right decision so we can support him on this issue.

**Mr. Joseph Volpe (Parliamentary Secretary to Minister of Health, Lib.):** Mr. Speaker, I have a brief comment. Forgive me if I again try to shed a little elucidation on the issue at hand today. I am sure members of the general public watching this debate are not finding the focus on the internecine party and partisan issues very helpful or productive to the discussion at hand. One could wonder whether parties that vote en bloc are being disciplined to a vote but

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others are being coerced into a vote. I do not think that is very helpful to the debate.

• (1310)

What might be worthy of understanding is that all victims are still capable of accessing the social safety net that is there and is enhanced for everyone. I refer specifically to additional health care services that will be provided for all those who are victims. Second, there is the Canada pension plan disability component that addresses urgent and immediate needs. Third, there is always the procedure which I mentioned earlier on that have not been abrogated, that have not been limited, that have not been dismissed which is the opportunity of every victim and his or her family to proceed either individually or in class before the courts for compensation.

None of those avenues have been restricted or diminished. It is important to keep those things in mind to frame the debate.

**Mr. Peter Stoffer:** Mr. Speaker, I rise on a point of order. The Parliamentary Secretary to the Minister of Health again rambles on and babbles on instead of asking a direct or pointed question.

**The Deputy Speaker:** Order. I know the hon. member means well by his point of order, but the fact is that this is a period for questions and comments. The hon. parliamentary secretary is making a comment and he does not have to ask a question in questions and comments. While I appreciate the hon. member's point I think in fairness the hon. member is entitled to complete his comments.

I am quite prepared to divide the time on the five minutes that is allowed for questions and comments but at the beginning of the period only one member rose and that was the parliamentary secretary. So I am giving him the floor and I will ask him to conclude his remarks in due course.

**Mr. Joseph Volpe:** As I was saying, Mr. Speaker, it is important for all members who want to be productive and instructive for all who are watching this debate to give a sense of direction and focus as to which aspects of what I have just described as the avenues available for all victims they object to.

I have pointed out that the legal route is always there. Nobody wants to curb those rights. There have been none diminished. Second, the social safety net which we have worked hard to reinforce, restructure and solidify is there for each and everyone and will be enhanced in these cases. Third, one very specific component is the disability function of the CPP which will address a most urgent and immediate need for those who precede that first option.

The offer we have on the table I might remind all members that came after much discussion and debate with all partners is one that

must in the end be supported by an independent arbitrator, i.e. the courts.

If members on the other side of the House are objecting to people coming forward and in the spirit of co-operation trying to resolve the most urgent problem that is directed to the period in time when governments could have acted differently and did not, then I think they should identify those and say so. They should do that rather than engage in what has become the prattle of what will happen on procedural motions in this House.

**Mr. Gary Lunn:** Mr. Speaker, I will respond to the points brought forth by my friend on the other side.

First of all, he said we are being coerced over here. If you believe that, then go back and speak to your Prime Minister and we will have—

**The Deputy Speaker:** Order. I urge the hon. member to address his remarks to the Chair.

**Mr. Gary Lunn:** Mr. Speaker, I apologize for that.

That is the first point I make. In another one he has suggested that there is money in the system. What he is really suggesting is that we should download this on to the provinces. Again, this government does not want to face up to the responsibility.

The most appalling thing I find in his remarks is the suggestion that these innocent victims who were given poisonous blood because of the negligence of this government go through the courts to find resolution. The government is willing to spend millions and millions of dollars to defend its position, which I find incredible that it is even doing so now, in the courts. Why not compensate them?

• (1315)

It has already been admitted that they were wrong. The Prime Minister has said, yes, they accept that there was wrongdoing. They have admitted that, but they want to go to the courts. He is suggesting that the courts are the proper avenue for these people, that the courts should decide what is fair. They are the ones that should be advocating this.

I cannot believe that a parliamentary secretary would suggest such a solution. It is absolutely unbelievable to suggest that these people should go to court. It is absolutely shameful.

**Ms. Carolyn Parrish (Mississauga Centre, Lib.):** Mr. Speaker, with your permission I will be splitting my time with the member for Brossard—La Prairie.

The federal Minister of Health and the ministers responsible for health in every province and territory have been handed one of the

most difficult decisions anyone in government has ever had to make. It is a task that members of the official opposition should be grateful they will never have to make. The ministers had to look into the eyes of people who contracted hepatitis C from the blood system before 1986 and say to them "You will not be receiving compensation for your suffering and the suffering of your families".

The decision addresses a time when Canada's blood system could have reacted differently. But governments could not have protected the people who received blood tainted by hepatitis before 1986 any more than they could have protected the very small number of people, for example, who are unaware that they are allergic to anaesthetic and die on the operating room table.

The Reform Party has argued that the Minister of Health made this decision because he does not care about human suffering. The Reform Party has tried to suggest that the Minister of Health lacks sympathy for all the people who suffer from hepatitis C.

This is the same Reform Party that has championed two tier medicine. This is the same party that wants one health care system for the wealthy and another health care system for low and middle-income Canadians.

Let us also not forget that this is the same Reform Party whose leader has labelled groups representing battered women as "special interest groups" and refused to even meet with them.

These are the people who are questioning the integrity and the compassion of one of the most decent human beings sitting in this House of Commons, the Minister of Health. It is one more cruel irony in this tragic course of events.

I apologize for the partisan tone of these remarks, but one of the things that makes me most uncomfortable about this whole debate is the political opportunism of some members of the Reform Party on this issue. While we feel deep sympathy for those who were infected before 1986 we must recognize that governments cannot compensate for every harm suffered by all individuals.

Like other Canadians, I have confidence in Canada's health care system. I trust that doctors, nurses and other practitioners are well trained and will do the very best they can with the technology of the day. But when I go into the hospital I go in with the knowledge that nothing is 100% guaranteed.

In 1977 I had a Caesarean section and a beautiful baby was delivered. I went into shock, lost a lot of blood and was given a choice between taking blood or taking an iron infusion. I was articulate and coherent enough to take an iron infusion, but had I been unconscious the doctors would have given me a blood transfusion. I have lived until today to watch that daughter grow up. Medical technology at the time could not possibly tell me

whether blood was dangerous or not, but I would have been more than pleased to take the extra 21 years. That is the risk we all take when we undergo severe and traumatic occurrences in the hospital.

The whole issue of compensation for harm caused through the health care system is complex. It requires a thorough and thoughtful debate. The decisions we make today regarding hepatitis C will have serious implications for the future of public health care in Canada. When is the government responsible when Canadians become sick? There should be a clear connection between the harm suffered and the inaction of governments.

Testing for hepatitis C was not done in Canada until seven years after a reliable test was available and used in the United States. The compensation package is an acknowledgement of responsibility for the government's inaction at that time.

● (1320 )

Governments cannot protect Canadians from infections they are unable to detect. Therefore, governments cannot accept financial responsibility when people become sick from these unknown, insidious diseases.

What can government do for innocent victims? Government can provide the best possible health care to Canadians. It can put more money into medical research in order to help victims but also to prevent a tragedy like this one from occurring again.

That is why I applauded the finance minister when he increased funding for the Medical Research Council.

I want to take this opportunity to encourage the federal and provincial health ministers to move forward on pharmacare initiatives so that those who suffer from hepatitis C and other diseases will not have to worry about the cost of drugs that will help them manage their illnesses.

As I said earlier in my remarks, I hope that the Reform Party, which is sponsoring this motion, will follow through on what it has started. I hope it will now recognize that Canadians sometimes become ill through no fault of their own. When that happens they require the best possible health care regardless of their ability to pay. I hope the Reform Party will join me in encouraging the government to ensure all Canadians have access to affordable prescription drugs.

In closing, many members of the official opposition have referred to their experiences in talking directly with Canadians infected with hepatitis C and with their families. I have also spoken with the victims of this tragedy. Some of the people I have spoken with will not be compensated because they were infected before 1986 and after 1990. I feel deep sympathy for them as individuals. When I talk with the parents of those children who are sick I cannot help but think of my own children.

*Supply*

However, as a legislator and as a government member I know that we have to make a decision that is fair and that is in the best interest of all Canadians. The decision that was taken by health ministers of all governments, representing four different political parties, is right and it is appropriate. It acknowledges a time when something could have been done to reduce the number of infections and was not.

For those who will not be compensated, we owe to them what we owe to all Canadians: universal and accessible health care and a commitment to continually strive for more new and better ways to deliver health care more effectively and more efficiently.

Whether this be a free vote, a whipped vote or whatever it is, my conscience is clear. I look forward to the vote on Tuesday. I will have no difficulty supporting this health minister's decision and the decisions of the health ministers across the country.

This health minister has more integrity and soul in him than all the members of the opposition. I have no difficulty supporting his decision.

**Mr. Grant Hill (MacLeod, Ref.):** Mr. Speaker, the member has said that the impetus for our motion is a partisan one. It is not very often in this House of Commons that we get unanimity from the opposition benches. Therefore, I would like to pose a question to her. Since she says that my motives are partisan, what does she have to say about the other opposition members on this side of the House who unanimously have asked for a free vote on this issue; not a confidence vote, but a vote from the heart instead of a vote from partisanship? What does she have to say to that?

**Ms. Carolyn Parrish:** Mr. Speaker, it is my pleasure to answer that question. All through history we have seen parties when they are in opposition and when they are in government. When in government the party has to make tough decisions based on the best interests of the Canadian public.

When the party is in opposition it is very easy to criticize. It is very easy to wave a flag and support supposedly downtrodden people. However, when in government the party has a sincere responsibility to make the right decisions based on all the information, based on what can be delivered and based on what is right for the Canadian public.

To be in opposition is, in fact, a joyous location when a controversial subject comes up because that party does not have to make all those hard decisions. It can just sit there and react.

**Mr. Peter Stoffer (Sackville—Eastern Shore, NDP):** Mr. Speaker, the hon. parliamentary secretary stated earlier that those people who do not get compensated can always go the CPP disability route. Obviously he does not have many people in his riding fighting for CPP claims.

• (1325 )

However, my question is for his colleague, who I congratulate on the wonderful birth of her child last year.

If the government of the day is not willing to compensate those 40,000 who will not be receiving compensation for hepatitis C, is she also recommending that they also try the CPP route? Is that what she is recommending along with the parliamentary secretary?

**Ms. Carolyn Parrish:** Mr. Speaker, I do not want to get too personal here, but I am 51 years old. If I had a baby last year that would truly be a medical feat. Just to clarify, I am not super woman. I had that baby 21 years ago and she is a delightful child.

My belief in the medical system in this country and the system of proper medical care would indicate that we have a first-class medicare system in Canada. For those who have not been compensated, my sincere hope would be that all provincial governments and the federal government would put as much money as possible into research on treatments, as was demonstrated in the last budget. We must continue to make the medicare system accessible to all, despite their economic status. We must also be extra sensitive to those who are suffering from hepatitis C to make sure that the best drugs are available to them. We should be in constant contact with the pharmaceutical companies and encourage them to do the best they can.

I believe that the system in this country is there. With a little bit of extra prodding we can make sure there is no one out there suffering because of lack of funds or lack of access to medical care.

**Mr. Greg Thompson (Charlotte, PC):** Mr. Speaker, I just want to remind the member that responsibility for the safety of the Canadian blood supply system rests totally and absolutely at the door of our national Minister of Health.

Given that, on questions and answers in this House over the last few months the minister has repeatedly stated that he did not want to see a lengthy, expensive, protracted legal case for these innocent victims. He said that he wanted to see a package that was compassionate and fair.

How does the member square that with what the party wants to do? On Tuesday the Prime Minister was cracking the whip, holding the big stick over them, forcing them to support something which they know in their hearts they cannot. Have the Liberals not swallowed themselves whole on this issue of compensation?

**Ms. Carolyn Parrish:** Mr. Speaker, that is a very interesting juxtaposition of ideas. I have to straighten out in my mind what he wants me to respond to. I think what he wants me to respond to is the concept of the whipped vote.



This Minister of Health has come up with government policy. It is not an unusual step for the government to vote on government policy in a whipped fashion. There is great exaggeration out there in the minds of Reform Party members about the disaffected Liberals in the backbenches.

I represent the Ontario caucus, which has 101 members. We all pretty well have faith in the decision. I am sure we will all come in on Tuesday and vote with the government because it is the right thing to do, not because we are whipped.

[*Translation*]

**Mr. Jacques Saada (Brossard—La Prairie, Lib.):** Mr. Speaker, when the federal, provincial and territorial health ministers announced the formula they had decided upon to provide assistance to hepatitis C victims, they did not do so lightly. Much thought had been put into it. They looked at the moral, systemic and human implications, but only after careful consideration did they reach a decision. There were indeed many aspects to take into consideration.

We must recognize that, unfortunately, today still too little is known about hepatitis C. Even if the scientific community is doing its best to keep expanding the knowledge base, we are still at a stage where we cannot even predict with any certainty how an infected person may react.

• (1330)

We know that hepatitis C is very different from HIV, although both can be transmitted through the blood. People with hepatitis C are not sentenced to die, and many continue to lead a completely normal, functional life without feeling any debilitating effect.

So, we are now able to identify the virus much better than before and the accuracy of screening tests is improving by the day, which makes the blood supply system increasingly safe. But we are always seeking to know more.

We have looked to other countries to see if we could learn anything from them. We have looked at what they have done to resolve hepatitis C problems caused by their own blood supply system. We did not learn much in the end.

We have found that, while most countries had made similar decisions under similar circumstances with the tragic results that we know, most did not take the same approach we took. We in Canada have taken action to prevent any harm to our fellow citizens that we could prevent, and we did so cautiously in consideration of all that was involved.

Canada was recently compared to other countries for its approach to resolving the hepatitis C crisis. I can think of Ireland in particular. In recent years, Ireland introduced its own assistance plan for hepatitis C victims.

### *Supply*

Health Canada officials travelled to Ireland to see how the Irish proceeded, and to understand why and how that formula was adopted. They found that the Irish formula was tailored to Ireland's very specific circumstances, and that it would not suit Canada's circumstances.

The hepatitis C tribunal was set up in Ireland after some 1,500 young mothers contracted the disease, in the seventies, when they were given a blood product called anti-D, which had been exposed to hepatitis C, although at the time hepatitis C was still unnamed and was called non-A and non-B hepatitis.

The anti-D product was used as a preventive treatment for new mothers and thus caused harm, even though it had been used without serious problems for quite a while. Most of the cases can be traced back to a unique plasma donor, making it clear that the blood in question should never have been used.

Many people infected with the anti-D product continued to give blood, since they had no reason to change their habits. This led to even more people being exposed through the blood supply system.

So, another blood supply system from another country also experienced problems of its own. The formula used by Ireland regarding its blood supply problems is quite specific, so much so in fact that no other country has used it.

Looking back at what we did based on what we now know we reviewed the blood system that Canada had in the eighties. We concluded that various measures could have been taken to avoid hepatitis C cases. We looked at what was done in the United States, even though most of the other countries were in a situation similar to ours. If we could turn back the clock, I do not think anyone would adopt the risk management method Ireland did in connection with its blood system.

Ireland was far slower to adopt international scientific risk management methods in connection with its blood system. Moreover, many western countries, including Canada, adopted that system.

Although Ireland never inaugurated the indirect screening test, that country's blood inquiry tribunal never faulted it for not doing so. Had Canada followed the Irish risk management method, it would have inaugurated the specific Hepatitis B screening test a year and a half later than it did. There would have been even more cases of infection. This is precisely what happened in Ireland.

Care must, therefore, be taken when seeking examples to follow. The two types of government activity, the concern for health and safety as opposed to the compensation of people let down by the health system call for two very different types of comparison. The scientific community constantly distributes information on the international level.

*Supply*

• (1335)

We could have followed the US example in 1986, but we did not, nor did most other countries. Normally, issues such as public health, and more specifically the monitoring of diseases and safety, are addressed from a totally different perspective, for instance, than health care, which is generally based on a national vision.

It is therefore far more common for a national government to follow international scientific models than any other type of policy or initiative from some specific society, which reflects that society's specific history and way of looking at things.

We quickly understood that the situation had to be addressed within the Canadian context and that we could not simply apply policies from elsewhere and expect them to work here.

Should we copy the policies and methods of another country, especially when we have no guarantee they would be really effective here?

It is often said that social programs are not easily exported. Canadians continue to say they do not want a health care system like that of the United States, and President Clinton learned a few years ago himself that Congress had reservations about a single-payer universal health care system.

I say that because there are limits to the types of comparisons that can be made between Ireland and Canada, their system of health care and their way of dealing with the damages caused by the blood system. Sometimes it is useful to make international comparisons, but more often than not, it is not appropriate.

When the Canadian ministers of health announced that they wanted to settle claims for compensation by victims of hepatitis C, I pointed out that it would be a reasoned approach. This approach led us to concentrate on the period between 1986 and 1990.

Given that, in all fairness, we must not make a distinction between the harm done by the blood system and other types of harm caused by the Canadian health care system as a whole, a problem of this magnitude warrants thorough debate and, to be quite honest, I do not think such a debate has been held yet.

**Mr. Maurice Godin (Châteauguay, BQ):** Mr. Speaker, I just to the member for Brossard—La Prairie. I cannot believe my ears. I hope he did not say what I think he did.

He just told me that a person who has contracted hepatitis C can live a normal life. The riding of Brossard-La Prairie is not far from my riding on the south shore. A former manager in my riding, a man who is 6'1" and weighs 200 pounds, now spends his days in bed because of hepatitis C.

I would like to know if the member is interested in coming to my riding next week and meeting this man, so that he might learn something and not give us this sort of nonsense.

**Mr. Jacques Saada:** Mr. Speaker, what is unfortunate in this kind of debate is when it slips into sensationalism that has nothing to do with the fundamental issues.

I did not say that nobody suffered with hepatitis C, or that there were no after-effects. What I said just now was that a substantial number of those with hepatitis C did not suffer from after-effects that would prevent them from living a normal life. I would like my remarks to be interpreted accurately, instead of being used so obviously to make political hay.

[English]

**Mr. Roy Bailey (Souris—Moose Mountain, Ref.):** Mr. Speaker, it has been a bad day. It is beautiful outside but not so great inside. I do not want to get down to anything but cold, hard facts. Let us look at reality.

The case is prevalent all across Canada. It does not miss anybody's constituency. I wonder how the hon. member would respond to a cold, hard situation. Here we have two people in the same town both given blood transfusions in the same year. One person contracted hepatitis C and the other has HIV. One will be compensated and the other will not. All through the same blood. All through the same causes.

How can members opposite possibly say to the people of Canada that this one is this way and that one is that way? This is a problem for the people over there. They are not dealing with realities. They come in here with a canned speech and read it off. They stay to the party line. They are not thinking with their hearts. Their hearts do not tell them to snub this person living on this side of the street and that another person will get compensation. They do not have an answer to that question. I have been listening to them for four days on this issue and they have not answered that question.

• (1340)

Could the hon. member deal with absolute reality and tell me how he would deal with a situation like this one?

**Mr. Jacques Saada:** Mr. Speaker, I think there are two issues to consider here. One has to do with the responsibility of the government—

**Mr. Roy Bailey:** They both have.

**Mr. Jacques Saada:** I would like to have a chance to answer. One has to do with the responsibility of the government with regard to what could have been done and was not done. One has to do with a much broader issue, the no fault issue.

*Supply*

On the first part, time and again not only the Minister of Health but many of my colleagues have explained the reasons the ministers of health throughout the country agreed to limit the period from 1986 to 1990. However, in terms of no fault, I refer my colleague to the Krever report on page 1044.

I will read it because I think it is being interpreted in a very dubious way. The Krever report is simply saying, as it states on page 1044:

I recommend the creation of a no-fault scheme for blood-related injury.

Then a bit further on it states:

The provinces and territories of Canada (not the federal government) should devise statutory no-fault schemes that compensate all blood-injured persons promptly and adequately—

The debate we are having here concerns a no fault philosophy that ought to be debated first and foremost, if we follow Krever, at the provincial and territorial levels.

**Mr. Grant McNally (Dewdney—Alouette, Ref.):** Mr. Speaker, it is a sad day that we have this debate in the House today because of the decision of the Minister of Health and the fact that he has created two tiers of victims in the country.

I would like the hon. member to perhaps turn the page to 1045 in the Krever report and read this statement:

Until now, our treatment of the blood-injured has been unequal—. Compensating some needy sufferers and not others cannot, in my opinion, be justified.

I wonder how the members of the government can stand in their places today and argue the fact that there should be two tiers of victims: those who are compensated and those who are not. It is shameful. I know there are several hepatitis C victims watching this debate today.

Let us just do a quick summary of what we have heard so far today. We have heard from members on the government side canned speeches from the minister's department and misdirection. They will not deal with the fundamental issue or question of the motion being put that there should be compensation for all victims of hepatitis C.

This is a non-partisan issue. All members of the opposition parties—colleagues in the Conservative Party, the Bloc Party, the NDP and the Reform Party—are in unison when they say to the government that it is wrong. Canadians know. The government knows it is wrong on this issue. In fact there is nothing wrong with being wrong if one does something about it. If a person admits a mistake and moves on people have honour and respect for that. If a person stonewalls and says there is no problem, deflects and will not stand in league, the people of this country have no respect for that.

• (1345)

I would like to focus on the human tragedy that this has become and I would like to focus on some of my constituents who have taken the time to write letters. There are heart rendering stories of individuals who have been affected by this tragedy and they have asked me to share their comments here in the House, that the government would listen to their stories, that the government would have compassion and hear what has happened to them by no fault of their own.

One of my constituents, Mrs. Laura Stoll from Maple Ridge, B.C., writes:

I am pleased to hear that [the health minister] supports compensation for victims of hepatitis C. The Krever commission calls for compensation, in which I fully agree. I would like to inform you how HCV has affected me.

In 1983 due to a motor vehicle accident I received a blood transfusion and in January 1996 was diagnosed with HCV. Needless to say, it was a dreadful shock.

I now have much bruising on legs and arms, blood vessels rupturing and leaving black marks and permanent brown marks on my legs. Then also swelling and pain in my legs, other effects are: nausea, dizziness, tinnitus and fatigue.

It is hard to have to read this letter and to share the pain this individual in my riding has had to suffer. She concludes by saying please bring about just compensation. She was initially thankful to the Minister of Health because compensation was coming forward and she thought there would be compensation for all victims.

She wrote me again on April 15 when she found out the truth of the matter:

I was greatly disturbed by the decision made by the health ministers to only compensate the HCV victims who received blood products from 1986 to 1990. These dates mean nothing, they were chosen by lawyers to define a case they would most easily win.

My family and I are counting on you to do the right thing and support compensation for all victims.

That is what I am compelled to do. I must stand in my place and make a compelling case for the victims of hepatitis C from my riding and across this country that this is morally wrong. My colleagues from all parties and I will stand in our places to point out to the government the wrong decision it has made in this case. It is so clear.

Mrs. Joyce Smith from my own home town of Mission B.C. writes:

I am writing on behalf of myself and all the other people in this province and in Canada who are suffering from the effects of tainted blood. I have been working on this letter for many, many days and I realize you may look at the length of this letter and wonder why it is so long. I have tried to downsize it, but because every bit of information I am sharing with you is of the utmost importance, I pray that somehow, in some way, it will help give you insight as to how my life has been dramatically changed. I also hope that it will show you some of the adversities we are dealing with in our everyday lives. There must be changes made to help compensate our ongoing burden of this illness. We are innocent victims of a crime that no one wishes to take responsibility of.

As time went on I did not get any better and the financial pressure was increased as my income had decreased. We started getting behind in our mortgage payments and other financial commitments. We could not pay our mortgage insurance, so now when

*Supply*

I die my husband will be left with a mortgage to pay. I was running scared and the stress was unbelievable.

• (1350)

She goes on in detail about the effects of hepatitis C and how it has impacted her life and the life of her family members. She concludes quite bravely:

You may be interested in knowing that through all of this turmoil and with what little energy I have I have set myself some goals. I will: do my part to help as many hep C people as is possible; tell anyone that will listen that I think it is absolutely deplorable the way decisions concerning our lives are kept in secret; stand and shout out loud how inhuman it is for the establishments, the Red Cross, the federal government and the provincial government to not accept their part of the responsibility for what has happened to us; make the most out of every moment of the day; hold my grandchildren just a little bit longer; watch for rainbows; pray and seek forgiveness for those I do not understand.

In closing, I wish to take this opportunity to thank you for your valuable time and understanding in this matter. I would appreciate hearing from you in the very near future. Please keep in mind that my future may not be as long as yours.

I have written to Mrs. Smith. I communicated with her my deep concern for her plight and the lack of action from the government side on this issue. It is quite clear that action can still be taken in this matter, that the government can change its mind and compensate all victims of hepatitis C.

I received another letter that was very disturbing to me. I know the individual who wrote to me. He was a community leader in the area in which I grew up. It was quite shocking to learn that he too had become a victim of hepatitis C. He has not even been able to tell his own family of his plight because of the impact it will have on their lives.

This is a wrong decision. All we are hearing is weak arguments from this government and it is time for the people of Canada to rise up, to call their members of parliament and to say no, we do not support you on this, change your mind and support all victims of hepatitis C.

**Mr. Peter Stoffer (Sackville—Eastern Shore, NDP):** Mr. Speaker, you are probably getting tired of my standing up all the time but I wish to commend my hon. colleague from Dewdney—Alouette, all of his constituents and all parties in the House that have received letters like the letter he just read.

I wish him to comment on one statement made by the member for Brossard—La Prairie, that some people with hep C can lead normal lives. Could he comment on that ridiculous, outrageous and cruel statement made by one of the Liberal backbenchers in the House today?

**Mr. Grant McNally:** Mr. Speaker, I thank my hon. colleague for the question because it is an outrageous statement made by the member opposite, that some people suffering from hepatitis C can go on to live normal lives. Perhaps that is the case but the constituents who have written to me have detailed the anguish, the

pain and the common tasks in their lives they used to do without any problem which are now difficult tasks for them, things such as going to the park.

One of my constituents writes that it is difficult to go any distance from home. By the time they get to where they are going for an outing she is too tired. She has to go home and rest. It is unbelievable that members opposite would be so callous, so uncaring, so insensitive to the fact that Canadians are suffering from hepatitis C. They do not have the decency to compensate these victims. They think their lives are fine.

**Mr. John Nunziata (York South—Weston, Ind.):** Mr. Speaker, as a former Liberal I am terribly and deeply disappointed at the position the government is taking. I was a member of that party for a good number of years. It seems to me that one of the hallmarks of Liberalism, one of the things that has permitted the Liberal Party to remain in office for so long over such an extended period of time is that for so many years it was a party that cared for the disadvantaged in Canada. It was a party that went to bat for innocent victims. It was a party that believed in fairness, equity and compassion.

• (1355)

Now we have a Liberal government. I can tell the Prime Minister and Liberal members opposite that rank and file Liberal members right across the country are phoning and telling me that they are ashamed of being Liberals given the position of the government with respect to this matter.

The mere fact that this government would force innocent victims, some of whom will be gravely ill and others dying, into court in order to receive compensation and some compassion is shameful. I hope the Prime Minister will look into his heart and ask himself how he would react if a member of his family were an innocent victim of the tainted blood system in this country.

The Ireland government has shown the way to compensate innocent victims. It has provided generous compensation for all victims of hepatitis C. How could a small country like Ireland have such a huge heart when a prosperous and large country like Canada can be so heartless when it comes to compensating innocent victims?

**Mr. Grant McNally:** Mr. Speaker, I thank my hon. colleague for his comments and his question.

The people of Ireland obviously have heart, compassion and concern for all the victims of this tragedy in their country. It would be my hope, as I know it is the member's, that Canadians would be proud of this government in reversing its decision and showing compassion and heart and showing that it cares for all the victims of this tragedy.

I sincerely hope the government is able to do that.

## STATEMENTS BY MEMBERS

[English]

### RACISM

**Mr. Gurbax Singh Malhi (Bramalea—Gore—Malton, Lib.):** Mr. Speaker, I am deeply concerned that British Columbia may be transforming into a racial tinderbox following reports that five members of a group known as White Power have been charged with the killing of Nirmal Singh Gill last January.

It must be noted that this violent slaying remains an isolated incident and in no way reflects mainstream Canadian attitudes toward minorities. The vast majority of Canadians are peaceful and tolerant and are just as shocked and outraged as I am by this terrible killing.

Still I do fear this particular hate crime may only be the thin edge of the wedge.

Therefore I call on my colleagues in the House to support efforts aimed at establishing a monitoring agency in Canada to track hate related incidents.

\* \* \*

### BILL C-4

**Mr. Jake E. Hoepfner (Portage—Lisgar, Ref.):** Mr. Speaker, a Senate committee has travelled to the western provinces to hear the concerns of farmers on Bill C-4.

One farmer stated: "If this bill demonstrates democracy in this country, then we are in deep trouble. At Confederation, would we as Canadians have accepted two-thirds of a say in our destiny?"

Another farmer says that they are scrambling to make ends meet, taking off-farm jobs and juggling crops. They are frustrated that they do not see the wheat board scrambling to do anything other than damage control.

The right to own, use and dispose of private property is one of the key foundations of any democratic society. The wheat board act, as presently constituted, violates this fundamental principle.

Ontario farmers will have an opportunity to export wheat directly into the United States. Denying western farmers the same economic freedoms will only serve to foster a feeling of resentment and division.

\* \* \*

### CANADA BOOK DAY

**Mrs. Judi Longfield (Whitby—Ajax, Lib.):** Mr. Speaker, I am pleased to rise today to mark the third annual Canada book day. The

*S. O. 31*

brainchild of a well known Canadian author, Lawrence Martin, Canada book day coincides with the UNESCO declared international book day.

• (1400)

Sponsored jointly by the Writers' Development Trust, a national charitable organization dedicated to the advancement and nurturing of Canadian writers and writing, the Department of Canadian Heritage and the private sector, the motto for this year's event is "give one, get one, read one".

We will be marking Canada Book Day in my riding in a special way. Councils in both Ajax and Whitby have officially declared today as Canada Book Day. I will be presenting a book by a Canadian children's author to every child born in my riding today. As of 1 p.m. I am pleased to report that I have four new constituents and five on the way momentarily.

I encourage all Canadians to visit the official Canada Book Day website to find out about events in their communities. I urge all Canadians to get one, give one, read one.

\* \* \*

### HUMAN RIGHTS

**Mr. Deepak Obhrai (Calgary East, Ref.):** Mr. Speaker, this week five white supremacists were arrested for the brutal beating death of Mr. Nirmal Singh, the janitor for a Sikh temple in Surrey.

If the five individuals who were arrested are found guilty, then their punishment should reflect the revulsion Canadians feel about this senseless act.

1998 is the 50th anniversary of the Universal Declaration of Human Rights. While Canada has made tremendous progress during this 50 years, this incident shows that we still have a long way to go in respecting the humanity of our fellow citizens.

I know that the entire House joins with the official opposition in telling the racist groups that their time is over. We will no longer put up with their hatred. We will no longer put up with their violence.

\* \* \*

### ARMENIAN MONUMENT

**Ms. Eleni Bakopanos (Ahuntsic, Lib.):** Mr. Speaker, two years ago this House passed a motion which was presented by the member for Brampton Centre designating the week of April 20 to 27 as the week of remembrance of the inhumanity of people toward one another.

Today I wish to pay tribute to my constituents who are Canadians of Armenian origin and all members of the Montreal Armenian community. I commend them for their uncompromising efforts and tireless work on the erection of a monument which will be inscribed with the following words:

*S. O. 31*

[Translation]

“We dedicate this monument to all victims of genocide and we urge all citizens to promote tolerance and social harmony. This recognition reflects the spirit of the Declaration of Human Rights”.

I am very proud that the monument will be located in Marcellin-Wilson park, in my riding of Ahuntsic.

[English]

Congratulations to my constituents for reminding us all that history should never be repeated. We must never forget this horrific crime against humanity.

\* \* \*

[Translation]

**WORLD BOOK DAY**

**Mr. Mauril Bélanger (Ottawa—Vanier, Lib.):** Mr. Speaker, today is world book day. It is an opportunity to remember that all governments must unite their efforts to encourage the spread of knowledge.

On this day, all our governments must reflect on the importance of allocating the necessary resources to help and support those that are directly and indirectly associated with the world of reading.

From large library networks to the neighbourhood library, not to mention school boards and the publishing industry, all are working at promoting access to reading and at developing a love of books among our young people.

April 23 is also an opportunity to stress the importance of copyright, and to think of those who try to make a living from their writings but who, unfortunately, do not reap the benefits of their efforts.

I wish you all a good reading.

\* \* \*

[English]

**STATUS OF WOMEN**

**Mr. Paul Steckle (Huron—Bruce, Lib.):** Mr. Speaker, today marks the 70th anniversary of the beginning of one of the most revolutionary legal battles ever to be undertaken. On this day in 1928 the Supreme Court of Canada ruled that women were not persons under the British North America Act. As you can imagine women across the empire were disturbed by this decision and as such they took their fight to the British Privy Council. Today we proudly celebrate the final decision made by that body.

Because of the efforts of individuals such as Senator Emily Murphy, women across the commonwealth were granted the status

of persons. As a result, in Canada today men and women enjoy equal societal privileges, protection and status under the law. Despite that, there are still many places in the world that women are treated as second class citizens.

As Canadians we must continue to work to secure positive, civil and legal development in nations that have not yet been liberated by the effects of enhanced personal freedom and true gender equality. Indeed it is our duty to lead by example. Canada is and has always been a world leader in these areas. I am proud to support—

**The Speaker:** The hon. member for Carleton—Gloucester.

\* \* \*

[Translation]

**STATUS OF WOMEN**

**Mr. Eugène Bellemare (Carleton—Gloucester, Lib.):** Mr. Speaker, April 23 marks the 70th anniversary of one of the most important decisions made by the Supreme Court of Canada, namely the recognition of women as legal persons.

• (1405)

Prior to that decision, women had practically no rights. They could not acquire property without the signature of a legal entity. We could list many rights that women did not have.

Today, women can give their full measure in every sphere of activity. Let us hope that they will continue to take their place in our society, particularly in third world countries.

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[English]

**YOM HASHOAH**

**Mr. Monte Solberg (Medicine Hat, Ref.):** Mr. Speaker, today is Yom Hashoah, the day that Jews and Gentiles pause to remember the horror of the Holocaust.

From 1933 to 1945 six million Jews and millions of other innocent victims were burned in the ovens of Auschwitz and other concentration camps. This unparalleled crime against humanity must never happen again.

There is a Hebrew word that I would ask all members of this House to learn. It is “zachor” and it means to remember. We owe it to the dead to never forget their tragedy and we owe it to the living never to allow the Holocaust to happen again.

On behalf of the official opposition I would like to express my personal commitment to ensure that the world learns from the Holocaust. On this the eve of the 50th anniversary of the modern State of Israel, I promise to zachor.

**MINING HALL OF FAME**

**Mr. Brent St. Denis (Algoma—Manitoulin, Lib.):** Mr. Speaker, I would like today to congratulate the newest inductees into the Canadian Mining Hall of Fame located in Elliot Lake in my northern Ontario riding.

This year's inductees are very special as they not only highlight mining's very significant contribution to our economy but its importance to research and development in Canada and the mining industry's success around the globe.

This year's inductees are: Anthony Barringer, whose company was a major centre for mining research and development in Canada; Benjamin Taylor Bell, the founder of the Canadian Institute of Mining, Metallurgy and Petroleum; Gerald Hatch, for his enormous contribution to the advancement of metallurgy and leadership in multidisciplinary consulting services; Stephen Ogryzlo, for his mining successes around the world; Murray Pezim, for his discovery of northern Ontario's Hemlo gold camp; and Franklin Pickard, for his leadership and vision in guiding Falconbridge to international prominence.

I call on all members of the House to assist me in congratulating these builders of Canada's world class mining industry. I encourage everyone to come and visit the Mining Hall of Fame in Elliot Lake.

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**CANCER**

**Ms. Wendy Lill (Dartmouth, NDP):** Mr. Speaker, every year 60,000 Canadians die of cancer. This month the Canadian Cancer Society hopes to raise \$21 million in its fight against the disease.

We can support the society's efforts through donations of time and money but the government can go one step further. It can adopt the Canadian Cancer Society's recommendations to prevent future cases of lung cancer by abandoning its plan to water down the sponsorship provisions of the Tobacco Act, investing in medical research to levels comparable with other industrialized countries and restore its \$3.5 billion cut to the health care system.

The government must also investigate environmental links to cancer. The CAW for example has made cancer the number one concern of the workplace environment, a model for the future.

The New Democratic Party congratulates the Canadian Cancer Society for its important work. We will continue our commitment to fight for medical research, quality care and prevention strategies for all Canadians.

*S. O. 31*

[Translation]

**BOOK AND READING SUMMIT**

**Mrs. Madeleine Dalphond-Guiral (Laval Centre, BQ):** Mr. Speaker, today is World Book and Copyright Day, a day honouring books and authors and set aside to encourage people to discover the pleasure of reading and recognize the contribution writers make to cultural and social advancement.

The book and reading summit, presided over by the premier of Quebec, began yesterday and will conclude at the end of the day today. Following a series of consultations, this summit brings together stakeholders, who are assessing the situation and looking at ways to develop a policy on reading appropriate to Quebec society.

With the sacrosanct civilization of the image standardizing thinking, Quebecers must redevelop their taste for reading. Reading is the route to knowledge, communication, thought and pleasure. It is a source of great delight.

In closing, I would like to congratulate Bruno Hébert, who was awarded the Association des libraires prize yesterday for his novel *C'est pas moi je le jure!*

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**BLOC QUEBECOIS**

**Ms. Raymonde Folco (Laval West, Lib.):** Mr. Speaker, for the past few days now, the members of the Bloc Québécois have been carrying cheques around Quebec signed by Louise Beaudoin, a minister in Lucien Bouchard's government.

We have learned that the member for Louis-Hébert presented a fine cheque for \$5,000 on behalf of the Government of Quebec to the management of the Salle Diane-Bélanger in Sillery, a Liberal riding provincially.

● (1410)

The member for Beauharnois—Salaberry is also carrying around cheques from the Government of Quebec. He apparently gave a helping hand to two municipalities in his riding with funds from Ms. Beaudoin's budget.

The Bloc Québécois is behaving with an indecency rarely seen in this House, so much so that Ms. Beaudoin was obliged to make a public apology for this behaviour. We are still awaiting denunciation by the leader of the Bloc Québécois.

*S. O. 31*

### GRANBY ZOO

**Ms. Diane St-Jacques (Shefford, PC):** Mr. Speaker, with each spring comes the urge to clean up, but this chore can actually be fun when it takes place in the Granby zoo, in my riding.

On this occasion, the community is invited to lend a hand to the staff to clean up and prepare the zoo to welcome the thousands of visitors who will come through its gates this summer. The Granby zoo is not only a local pride and joy, but a tourist attraction renowned across North America.

Thanks to the involvement of the management and staff of the zoo as well as the whole community, this year will be the 10th year we hold, with great pride, this community spring cleaning event at the Granby zoo.

\* \* \*

### NATIONAL VOLUNTEER WEEK

**Mrs. Christiane Gagnon (Québec, BQ):** Mr. Speaker, on the occasion of national volunteer week, whose theme this year is "I feel like taking action, I volunteer", I salute the tireless work and sustained involvement of more than 1,000 community organizations in my riding alone and several thousands in society at large.

At the community, cultural and recreation levels, these organizations do a great deal to improve our quality of life.

I would like to pay tribute to the work and dedication of these men and women who devote their energy and dynamism to serving their community. They make an invaluable contribution to our society. Our thanks to them.

\* \* \*

### BANKING

**Mr. Denis Paradis (Brome—Missisquoi, Lib.):** Mr. Speaker, I would like to express concern about the impact a potential bank merger could have on ever increasing bank charges.

When I toured the 42 municipalities in my riding of Brome—Missisquoi, my fellow citizens told me they were outraged by bank charges. Today, I am proud to have the written support of 163 colleagues, a majority of members, on all sides of this House, for the bank charges bill I introduced on February 4.

Together, we represent more than 16 million Canadians and numerous small and medium size businesses. Next Monday, our Liberal caucus committee will be meeting in Montreal to hear witnesses on the banking situation. I will report back.

[English]

### YOUNG OFFENDERS ACT

**Mr. Jim Pankiw (Saskatoon—Humboldt, Ref.):** Mr. Speaker, surprise, surprise. The bleeding heart liberals have no heart to get tough on crime.

In typical Liberal fashion the minister is sitting on the fence with her changes to the Young Offenders Act waiting to see which way the political winds blow. Meanwhile violent teens continue on their merry, destructive way with full knowledge that if the law ever catches up with them, they will be treated with kid gloves.

"Kids" do not murder or commit violent assaults, but the Liberals treat these criminals as harmless children. We need immediate amendments to the Young Offenders Act that hold violent youth responsible for their actions and which act as a strong deterrent.

Reform MPs have organized a public meeting on the Young Offenders Act to be held on May 5 in Saskatoon.

Residents in my home province have lost complete faith in the youth justice system. Canadians have lost faith in this justice minister who has no stomach to do what is right.

\* \* \*

### LANTZ ELEMENTARY SCHOOL

**Mr. Scott Brison (Kings—Hants, PC):** Mr. Speaker, the trickle down effect of the finance minister's financial agenda is being felt by students and parents in Hants county in my riding. After making education and the millennium scholarship fund the central issue of this year's budget, the finance minister has cut transfers to Nova Scotia by \$25 million.

The students of the Lantz Elementary School in Hants county are feeling the effects of these past cutbacks. Over 220 students are sitting at home today because the carbon monoxide level in their school is seven times higher than the recommended level.

It is all too easy for federal politicians to dismiss such cases as a provincial problem because it is education. It is easy to cut in Ottawa where there is no tangible evidence of the impact of these cuts, but the impact is in Hants county today when those students sit at home because of the callousness of this federal Liberal government and the callousness of the Minister of Finance.

The health of these students today should take precedence over the promise of a scholarship in three years.



*Oral Questions***ORAL QUESTION PERIOD**

• (1415)

[English]

**HEPATITIS C**

**Miss Deborah Grey (Edmonton North, Ref.):** Mr. Speaker, some issues are just too big for partisan politics. Moral questions are bigger than any party. They are bigger than any prime minister. Questions like abortion, capital punishment or euthanasia. The question of abandoning hepatitis C victims falls into this exact same category.

I want to ask a question of the government, not as one MP to another but as one human being to another. Let me ask the Minister of Health why the government will not let its MPs vote according to their conscience on this motion of compensation.

**Hon. Herb Gray (Deputy Prime Minister, Lib.):** Mr. Speaker, it is very simple. The Reform Party is asking members of the House to vote non-confidence in the policies of the government and non-confidence in the policies of the 10 provincial governments.

The federal government and the 10 provinces have joined together in a decision on policy and the Reform Party is asking the people of the House of Commons to vote against that decision.

**Miss Deborah Grey (Edmonton North, Ref.):** Mr. Speaker, that is simply nonsense.

The Liberal member for Cambridge has said that he would vote with the victims on this matter, not against the government, and he is absolutely right.

I give the Prime Minister and all of his MPs my personal pledge that the official opposition will not treat this as a confidence motion. In fact the opposite is true. We will congratulate the government and say that it is doing what is right, that is the issue of compensating victims. That is what we care about.

I ask if the official opposition is not treating this as a confidence motion why should the government.

**Hon. Herb Gray (Deputy Prime Minister, Lib.):** Mr. Speaker, why is it that in almost every vote in the House on government measures, and with one or two exceptions on private members' measures, the Reform Party has voted as a single group? Let us have some explanations on that.

It is not simply a matter of what the hon. lady says at this time. It is a matter of what a vote amounts to in a fundamental way. She is asking and her party is asking members of the House to vote against not only the federal government but all the provincial governments.

**Miss Deborah Grey (Edmonton North, Ref.):** Mr. Speaker, it is not our view on this. The government House Leader, in the 1993 red book, included these words: "Parties in this House must have ample opportunity to place before parliament their alternatives for free and open debate and decision without artificial applications of non-confidence doctrine". He went on to say that opposition motions should not be treated as confidence motions unless they were explicitly advised of such.

Again I want to ask the government to do the right thing and answer this question. If the official opposition is not treating this as a confidence motion why should the government?

**Hon. Herb Gray (Deputy Prime Minister, Lib.):** Mr. Speaker, can we turn things around and if members of the opposition say a measure is a confidence measure we could totally ignore the way they are speaking?

What they are saying does not make sense. In so far as putting measures before the House for free and open debate, that is exactly what is happening today. That is what is happening on every measure. Let us have the debate. Let us have the vote.

**Mr. Grant Hill (MacLeod, Ref.):** Mr. Speaker, which Liberal said this: "When there are resolutions, as there are today involving victims rights, members of this party vote as they see fit?" That was the current health minister in 1996.

He was talking about exactly the same type of motion in the House, an opposition motion. Just what caused him to change his tune?

**Hon. Allan Rock (Minister of Health, Lib.):** Mr. Speaker, the hon. member knows that debate was about something completely different. It was about the criminal justice system and the rights of victims before the courts.

In all that these hon. members have said today and in the past about this issue there is one question with which they refuse to come to grips because it is the most difficult question of all, namely, can we sustain public health care in the country if we make cash payments to all of those who are harmed, regardless of fault, through risks inherent in the health system.

• (1420)

They will not come to grips with that question but Canada's 12 ministers of health faced it and decided that what was right.

**Mr. Grant Hill (MacLeod, Ref.):** Mr. Speaker, the Deputy Prime Minister, the House leader and the health minister all know that this is not a confidence vote.

This is a vote about whether or not every victim of hepatitis C from tainted blood should receive fair and just compensation. I can hardly believe that they will hang their whole process on a vote of confidence.

*Oral Questions*

Nobody, not a single party in the House, will treat this as a confidence motion. I have given the government my personal guarantee of that.

Why then shall the government cause this to be a confidence motion?

**Hon. Herb Gray (Windsor West, Lib.):** Mr. Speaker, the hon. minister has just made a real revelation. The uniting of all the parties, not just of the right but of the NDP, has suddenly taken place. This is something the press should grasp. It is a big revelation.

At the end of the day we are being asked to vote against the position of the government, a considered position taken as a matter of discussion and agreement with all 10 provincial governments. The hon. member is asking us to vote against Premier Klein of Alberta, against Premier Harris of Ontario, against Premier Filmon of Manitoba and against all other provincial premiers.

**The Speaker:** When members ask questions courtesy would dictate that we listen to the questions and answers. I encourage you to do so.

\* \* \*

[Translation]

### PROFESSIONAL SPORTS

**Mr. Gilles Duceppe (Laurier—Sainte-Marie, BQ):** Mr. Speaker, the heritage subcommittee is currently looking at sports funding in Canada.

This morning, we learned that the government would be favourable to a tax deal for subsidizing professional sports teams.

Does the heritage minister find it normal, when millions of dollars are being cut from health and the federal government is refusing to compensate hepatitis C victims, that thought is being given to a tax deal with sports millionaires?

**Hon. Sheila Copps (Minister of Canadian Heritage, Lib.):** Mr. Speaker, the government has never taken such a position. I do, however, have some respect for a House subcommittee on which all parties are represented, including the Bloc Quebecois, that has one member.

**Mr. Gilles Duceppe (Laurier—Sainte-Marie, BQ):** Mr. Speaker, we too have great respect for the committee, but certain statements have been made by certain people on the government side.

Yesterday, we welcomed olympic athletes here who managed to win medals, in spite of meager government funding.

How can the Minister of Canadian Heritage justify her government's thinking of subsidizing professional athletes, who earn millions yearly, when it provides amateur athletes who bring back medals a mere \$5,700 annually, on average?

**Hon. Sheila Copps (Minister of Canadian Heritage, Lib.):** Mr. Speaker, once again, we can see just how bankrupt the Bloc Quebecois has become.

**Some hon. members:** Oh, oh.

**Hon. Sheila Copps:** We know that a committee is looking at a rather important issue. We know the entire community in Quebec City was upset to lose the *Nordiques*.

What is happening now is that a House committee, comprised of government and opposition MPs, including one from the Bloc Quebecois, is trying to look at how we can keep hockey here in Canada. I trust that they are going to be join in and make some good recommendations and that they are going—

**The Speaker:** The hon. member for Rimouski—Mitis.

**Mrs. Suzanne Tremblay (Rimouski—Mitis, BQ):** Mr. Speaker, my question is also for the Minister of Canadian Heritage.

The U.S. ambassador to Canada recently said that, if we wanted to keep professional sports teams from leaving the country, all we had to do was follow their example and provide teams with all sorts of funding to keep them home.

Will the minister admit that the real problem is that this American funding of professional sports constitutes unfair competition and that the real solution would be to lodge a complaint under NAFTA against such competition?

• (1425)

**Hon. Sheila Copps (Minister of Canadian Heritage, Lib.):** Mr. Speaker, I think that a committee is looking at a number of issues. One thing I know is that the member herself has had an opportunity to speak with the former president of the *Nordiques* about possible solutions a little while ago.

I hope that everyone will work together to find an answer to this problem, which is of concern to the Montreal Canadiens, as well as all Canadians.

**Mrs. Suzanne Tremblay (Rimouski—Mitis, BQ):** Mr. Speaker, what the minister does not understand is that there is in fact a subcommittee, but members are announcing solutions on television, before we have finished our work.

How can one justify spending public money on teams that pay their players millions of dollars and that, to top it all, refuse to open their books?

**Hon. Sheila Copps (Minister of Canadian Heritage, Lib.):** Mr. Speaker, I am not always in agreement with the hon. member, but today is an exception.

I think that we must now give the committee a chance to do its work. We are awaiting the report, which will come out in October, and when we have a good report, we will look at the results in order to decide to what extent we can work together to save hockey

teams, because hockey is a sport that was created in Canada for Canada. Why not?

\* \* \*

[English]

### HEPATITIS C

**Ms. Alexa McDonough (Halifax, NDP):** Mr. Speaker, Canadians have come to see the health minister as Dr. No: no to more money for health care, no to fair compensation for hep C victims. The government can yet say yes: yes to human needs, yes to all victims of hepatitis C.

The upcoming vote is a watershed moment in this parliament, not a test of confidence but a critical test of liberal compassion. Will the Prime Minister say yes to compensation for all victims of hepatitis C?

**Hon. Allan Rock (Minister of Health, Lib.):** Mr. Speaker, the hon. member, like others in the House, refuses to come to grips with the real question here, the tough question: When should the governments of Canada pay cash compensation to people who are harmed inadvertently, without fault, through risk inherent in the medical system?

Her party colleagues in British Columbia and in Saskatchewan did come to grips with that question. Those ministers of health were at the table with me, with all ministers across the country. We considered that question. We concluded that we should pay to compensate those who were harmed when it was avoidable, and that is what we are doing. 22,000 Canadians were harmed. It was avoidable. They would—

**The Speaker:** The hon. leader of the New Democratic Party.

**Ms. Alexa McDonough (Halifax, NDP):** Mr. Speaker, imagine what threats were levied against government members who were ready to compensate all hep C victims. The democracy policy should not be driven by threats. It takes leadership and compassion but sadly that leadership and compassion are not evident on the government front benches these days.

Why will the Prime Minister not remove the muzzle on his own members? Why will the government not let those prepared to provide leadership and compassion do so and let them vote compensation to all hepatitis C victims?

**Hon. Herb Gray (Deputy Prime Minister, Lib.):** Mr. Speaker, we have put \$800 million on the table. Certainly that is a tangible sign of concern and compassion. I ask the hon. member why she does not direct her question to Premier Clark, the NDP premier of

British Columbia? Why does she not direct her question to the other NDP premier in the country?

This is a matter arising out of an agreement with these premiers.

**Some hon. members:** Oh, oh.

**Hon. Herb Gray:** Opposition party members shout. It shows the weakness of their arguments because they cannot admit that everybody else in the country at the level of the provincial governments agrees with this approach. They are not willing to turn around and attack—

**The Speaker:** The hon. leader of the Conservative Party.

**Mrs. Elsie Wayne (Saint John, PC):** Mr. Speaker, the health minister said yesterday that this was the age of class action. It would appear he cares more about the courts than compassion.

The minister also said that his hepatitis C deal was the right thing to do tomorrow, next week, next month and next year. A lot of his caucus does not feel that way. Saying no to people who have been harmed with hepatitis C through no fault of their own is never the right thing to do.

• (1430)

When will the minister admit that he is more concerned about money than the moral courage to do what is right for all—

**The Speaker:** The hon. Minister of Health.

**Hon. Allan Rock (Minister of Health, Lib.):** Mr. Speaker, I can tell the hon. member that what takes courage is to make the right decision in the long run for the public health system in Canada. That is what takes courage.

It would be easy to write a cheque to everybody who has a claim because we all feel personal compassion for people harmed through no fault of their own, but that is not the issue. The issue of running a government, the issue of trying to save medicare in this country is how many receive cash payments because they were harmed without fault by government. That is the tough question. We had the courage to answer that question in favour of the public health system.

[Translation]

**Mr. André Bachand (Richmond—Arthabaska, PC):** Mr. Speaker, one thing we can see in the House is that the Minister of Health has lost the fight with the Minister of Finance. He is resting on his laurels, letting innocent victims of hepatitis C take to the street to air their grievances.

Yesterday, the minister said “None of us likes to say no to people who have been innocently harmed and who are asking for something which we cannot give”.

*Oral Questions*

On what is his refusal based? Is it a question of dates, of policy, or of money, because of the Minister of Finance?

**Hon. Allan Rock (Minister of Health, Lib.):** Mr. Speaker, our decision was based on the criterion of the government's responsibility. All of Canada's health ministers agreed that our approach was an appropriate one.

The entire health care system always entails risks for every member of the public. Is the hon. member suggesting that all governments should compensate all victims all the time? That is not possible. So we made a choice, and we decided on an appropriate guideline.

\* \* \*

[English]

**JUSTICE**

**Mr. Chuck Cadman (Surrey North, Ref.):** Mr. Speaker, Regina and Saskatoon have some of the highest rates of car theft and burglary in the country. Authorities believe that almost 90% of these crimes are committed by about 100 youths. We obviously have at least 100 Saskatchewan youths who are not getting the message.

Almost daily the minister tells us that she is dealing with deficiencies in the Young Offenders Act in a timely fashion. Why does she not introduce legislation to increase the maximum penalty from three years, especially for these habitual and repeat offenders?

**Hon. Anne McLellan (Minister of Justice and Attorney General of Canada, Lib.):** Mr. Speaker, as I have indicated in this House before, this government has every intention to respond to the standing committee report in relation to the renewal of youth justice system.

Let me remind hon. members on the other side that this government also believes profoundly that there are no simplistic solutions to the question of the renewal of the youth justice system. Consequently we are in the process of developing a response that reflects the three values identified by Canadians, protection of society, crime prevention and rehabilitation.

**Mr. Chuck Cadman (Surrey North, Ref.):** Mr. Speaker, yesterday four adults and one young offender were charged in the murder of Nirmal Singh Gill in my city of Surrey. The four adults ranging in age from 20 to 26 have all been named. The Young Offenders Act protects the identity of the 17 year old.

Time has run out for this justice minister. Does she feel the protection of identity is reasonable in cases of this nature?

**Hon. Anne McLellan (Minister of Justice and Attorney General of Canada, Lib.):** Mr. Speaker, the hon. member raises a very serious situation of alleged hate, crime motivated by hate. I would like hon. members on the other side to explain why for

example they did not support this government and others in this House in relation to Bill C-41 where we made the motivation of hate an aggravating factor in sentencing.

\* \* \*

[Translation]

**HEPATITIS C**

**Mrs. Pauline Picard (Drummond, BQ):** Mr. Speaker, my question is for the Deputy Prime Minister.

A number of victims of hepatitis C have been ignored by the federal government, which continues to refuse to compensate them, despite the terrible injustice done to them and despite the recommendations of Mr. Justice Krevier.

As the government continues to consider investing millions of dollars in professional sport, how can it remain so inflexible, categorically denying compensation to victims of hepatitis C who have been left out in the cold?

• (1435)

**Hon. Allan Rock (Minister of Health, Lib.):** Mr. Speaker, I am wondering whether the hon. member considers that the Quebec minister of health has abandoned victims of hepatitis C, because he agrees with us. He took the same approach, which was to compensate those who contracted the virus between 1986 and 1990, the period in which those responsible could have acted to prevent infection.

**Mrs. Pauline Picard (Drummond, BQ):** Mr. Speaker, they have the money, they should pay. We know that the Minister of Finance is currently ahead of his budget projections by some \$21 billion.

With the federal government swimming in money, could it not find the few million dollars needed to repair the injustice done to the victims of hepatitis C who are not being compensated?

**Hon. Allan Rock (Minister of Health, Lib.):** Mr. Speaker, the hon. member is wrong.

I personally was involved with Mr. Rochon in the discussions on this question. We did not determine our position according to the amount of money available. We did so based on the principle of government responsibility. And together, Mr. Rochon and I, the Parti Quebecois and I, decided that the principle of responsibility would determine which of the victims would be compensated.

\* \* \*

[English]

**TAXATION**

**Mr. Monte Solberg (Medicine Hat, Ref.):** Mr. Speaker, as millions of Canadians are filling out their tax returns this week I have one simple question for the finance minister. Why are

*Oral Questions*

Canadians still paying the highest personal income taxes in the G-7?

**Hon. Paul Martin (Minister of Finance, Lib.):** Mr. Speaker, there is no doubt that we inherited a very difficult financial condition when we took office.

However, certainly as a result of the elimination of the deficit I am pleased to announce, in case the member has not noticed, that since last November we reduced unemployment insurance premiums from \$2.90 to \$2.70. In the budget 400,000 Canadians no longer have to pay tax of any kind and 83% of Canadians saw the 3% surtax eliminated.

I thank the member for his question.

**Mr. Monte Solberg (Medicine Hat, Ref.):** Mr. Speaker, that is nonsense and the minister knows it. According to CIBC Wood Gundy economist Jeff Rubin says: "Canadians' tax bills will be some \$6 billion higher as a result of the cumulative impact of the last five Liberal budgets". He said that in the wake of the last budget.

The minister knows taxes are up. We know taxes are up. Jeff Rubin knows it and Canadians know it. When is the minister going to acknowledge that Canadians have the highest tax burden in the G-7 and he has done zip about it?

**Hon. Paul Martin (Minister of Finance, Lib.):** Mr. Speaker, the fact is in the last budget we brought in probably the most substantial tax reduction in the course of the last decade.

However, the hon. member is right about one thing, government revenues are up. Our revenues are up because over the course of the last four years one million Canadians have gone back to work. Not only that, but in the last year 453,000 Canadians went back to work.

If the truth be told, Canada is now creating more jobs on a percentage basis than any other G-7 country, including the United States.

\* \* \*

[*Translation*]

**EMPLOYMENT INSURANCE**

**Mr. Paul Crête (Kamouraska—Rivière-du-Loup—Témiscouata—Les Basques, BQ):** Mr. Speaker, only 36% of the unemployed in Canada now qualify for benefits. Things have been going from bad to worse since the Liberals took office.

Does the Minister of Finance, who always makes fine-sounding speeches in response to our questions, not realize that the thousands of jobless people who no longer qualify for benefits cannot feed their children with the minister's rhetoric or statistics?

[*English*]

**Mr. Robert D. Nault (Parliamentary Secretary to Minister of Human Resources Development, Lib.):** Mr. Speaker, I want to

make it very clear to the member that the benefit to the unemployed ratio has gone up in this last month. The reason why it is going up is that more people are qualifying for benefits. Yes, there are fewer people on benefits for a number of reasons.

• (1440)

As the Minister of Finance has said, we have created over a million new jobs since the government came into office. Unemployment is going down substantially since we came into power in 1993. As sure as I stand here, the unemployment will continue to go down with the kind of policies we are implementing.

[*Translation*]

**Mr. Paul Crête (Kamouraska—Rivière-du-Loup—Témiscouata—Les Basques, BQ):** Mr. Speaker, in regions like the Gaspé Peninsula and the Magdalen Islands, more than 40% of young people are unemployed and the vast majority of them do not receive any benefits.

Could the Minister of Finance, who is good at pocketing money but not so good at answering questions, come down from his ivory tower and explain to the thousands of penniless young people that, this year, he will pocket over \$6 billion in surplus from the employment insurance fund?

[*English*]

**Mr. Robert D. Nault (Parliamentary Secretary to Minister of Human Resources Development, Lib.):** Mr. Speaker, I can only say to my hon. colleagues that obviously the BU ratio is bothering the government, bothering people of all persuasions, this side and that side.

When we implemented the EI act, that is the reason we brought in a process of monitoring reports every year to look at the changes under the new EI system.

There has been one monitoring report so far. There are another five to go. When those monitoring reports come forward we will be able to tell the government and the people of Canada just why it is that certain changes are working or not working.

\* \* \*

**TAXATION**

**Mr. Rahim Jaffer (Edmonton—Strathcona, Ref.):** Mr. Speaker, the Canadian Income Tax Act is bigger than the average phone book. It is so complicated that every year more Canadians just throw their hands in the air and hire professional help to file their taxes.

Under the Liberals the tax act probably needs only two lines. Line one, how much do you make? Line two, send it in.

Canadians pay the highest income taxes in the G-7. Is that why the finance minister is smiling?

*Oral Questions*

**Hon. Harbance Singh Dhaliwal (Minister of National Revenue, Lib.):** Mr. Speaker, if the hon. member were following what is happening at Revenue Canada he would understand that we are streamlining. We are simplifying the administration. Up to eight million Canadians can file their tax returns right over the phone. We are trying to improve. We are trying to simplify and make it easier for people to file their tax returns.

I know it is very difficult for a lot of Reformers to follow the tax form. I am sure we have volunteers who can help them do that this year.

**Mr. Rahim Jaffer (Edmonton—Strathcona, Ref.):** Mr. Speaker, I guess streamlining means that the size of the phone book goes from the size of the Toronto area to the size of the Edmonton area.

When tough questions come up the Liberals will try anything to avoid answering them. It would be great if Canadian business owners could register their companies in the Bahamas to avoid high taxes. But for most Canadians that is not an option.

Again, why do we pay the highest personal income taxes of the G-7?

**Hon. Paul Martin (Minister of Finance, Lib.):** Mr. Speaker, when we look at the total burden that any taxpayer in any country has to pay we have to look at all. As an example, our payroll taxes are substantially lower than the G-7 average. In fact, they are lower than in the United States.

It is true that we want to bring personal income taxes down and we did so in the last budget; 83% of Canadians saw the 3% surtax eliminated and 400,000 Canadians are no longer paying taxes. We have made it very clear that as a result of the increasing fiscal dividend we will return that money back into the pockets—

**The Speaker:** The hon. member for Argenteuil—Papineau.

\* \* \*

[Translation]

**BOOK INDUSTRY**

**Mr. Maurice Dumas (Argenteuil—Papineau, BQ):** Mr. Speaker, today the government was caught in an undeniable inconsistency.

While the Minister of Canadian Heritage is subsidizing the Canadian book industry to the tune of \$30 million, the Minister of Finance is pocketing over \$120 million by charging GST on books.

On this World Book Day, can the Minister of Finance tell us when he will finally get around to abolishing the GST on books?

• (1445)

**Hon. Paul Martin (Minister of Finance, Lib.):** Mr. Speaker, in the past two years, we have put subsidies in place to support literacy in Canada and help Canadians learn to read.

If provinces, for instance the Atlantic provinces, want to reduce the tax on books, they have a right to do so.

The tax on books was imposed by the previous government, but that money is being used to help Canadians learn to read.

\* \* \*

[English]

**FOREIGN AFFAIRS**

**Mr. Carmen Provenzano (Sault Ste. Marie, Lib.):** Mr. Speaker, my question is for the Minister of Foreign Affairs. The United States has continuously relied on Canada as an ally in international disputes. Yet as quick as the Americans are to call on us for assistance, they long delay in giving Canada an exemption to the United States' invasive new entry laws.

Will the minister advise if the U.S. government has offered any explanation for its delay in acting on this matter which is of great importance to my riding of Sault Ste. Marie and all Canadians?

**Hon. Lloyd Axworthy (Minister of Foreign Affairs, Lib.):** Mr. Speaker, I very much appreciate the concern of the hon. member and his constituents. It is important to point out that it is a concern expressed by many Americans on the other side of the border. This is a matter of mutual concern.

Through our efforts at our embassy in Washington we have been able to organize a very broad based collaboration. One of the results of that is that right now there is an amendment to section 110 of the U.S. immigration Act before the judiciary committee of the Senate. We hope to see its eventual passage.

We had very intensive discussions with Secretary of State Albright when she was here. We intend to follow up very shortly. I can assure the hon. member that we will exercise every possible effort to ensure that we keep an open border.

\* \* \*

**NATIONAL DEFENCE**

**Mr. Art Hanger (Calgary Northeast, Ref.):** Mr. Speaker, all members of this House certainly support the use of vaccines and other protective measures against chemical and biological threats to our military personnel. However, we also want to ensure the safety of these vaccines. Since the American manufacturer of the anthrax vaccine was cited for violations by the food and drug administration over a year ago, did the Department of National

*Oral Questions*

Defence conduct an independent inspection of the vaccine before it was issued to Canadian troops?

**Hon. Arthur C. Eggleton (Minister of National Defence, Lib.):** Mr. Speaker, I can assure the hon. member that the vaccine is safe. It has been re-tested. It was re-tested before I took it myself. I did take it myself and our troops did as well. It was provided for them for their own safety and it is keeping them safe.

**An hon. member:** That explains his memory loss.

**Mr. Art Hanger (Calgary Northeast, Ref.):** Mr. Speaker, it would be a matter of opinion as to whether the minister suffers any ill effects from the vaccine. I think the minister should get a second opinion.

Health Canada granted the department permission to use the anthrax vaccine. Before it was granted that permission, was Health Canada aware that the food and drug administration in the United States forced the production plant to shut down because of these safety concerns?

**Hon. Arthur C. Eggleton (Minister of National Defence, Lib.):** Mr. Speaker, I am happy to offer the hon. member a vaccine that may do him some good.

There has been re-testing. This matter has been properly looked into. The vaccine is safe and has been administered to our personnel to safeguard them.

\* \* \*

[Translation]

**EMPLOYMENT INSURANCE**

**Mr. Yvon Godin (Acadie—Bathurst, NDP):** Mr. Speaker, with this government's changes to EI, plant workers and fishers in New Brunswick and the Atlantic provinces no longer qualify for benefits.

This is crab fishing season and the government is taking its time coming up with a plan for the fishery. These plant workers and fishers have no income and are waiting for the government to wake up.

Is the Minister of Fisheries and Oceans ready to unveil his fishery plan today, with the same agreement that was in place last year for plant workers and fishers, i.e. the solidarity fund?

• (1450)

**Hon. David Anderson (Minister of Fisheries and Oceans, Lib.):** Mr. Speaker, the plan for gulf crabbers will soon be in place.

**Mr. Yvon Godin (Acadie—Bathurst, NDP):** Mr. Speaker, on behalf of plant workers and fishers, I thank the minister.

This government always waits until it is too late before taking action. Thanks to the Liberals' reform, 64% of the unemployed people in the country did not receive benefits in 1997. What has the

government done? It has done the same thing it did in the case of the fishery, which is to say it has dragged its feet. Is it waiting for another fishery crisis?

My question is for the Prime Minister. With a surplus of close to \$20 billion, is the government going to put an end to the social catastrophe it has created and review EI eligibility criteria?

**Hon. David Anderson (Minister of Fisheries and Oceans, Lib.):** Mr. Speaker, in 1997, we had a co-management agreement with south gulf crabbers. This agreement provides for a percentage split with non-crabbers in order to help the traditional fleet achieve a break-even point. Each year, the size of their share depends on the price and the size of the TAC.

\* \* \*

[English]

**HEPATITIS C**

**Mr. Greg Thompson (Charlotte, PC):** Mr. Speaker, I want you to listen carefully to this one. If you were infected with hepatitis C on December 31, 1985, you would not be eligible for compensation. However, as crazy as it seems, but it is unfortunately the truth, if you were infected one day later, on January 1, 1986, you would be eligible.

Simply put, how can the minister stand in this place and defend such a bogus compensation package?

**Hon. Allan Rock (Minister of Health, Lib.):** Mr. Speaker, the ministers of health of Canada looked at this situation, made a difficult decision and said that the principle of who should be paid cash or compensation should be determined by who was infected at a time when it was avoidable, if we had acted as we should have.

Every commentator who knows about this chronology, who looked at it, has said that the beginning of 1986 was the time when we could have taken steps to avoid the infection. Before that it was a risk in the system, like all the other risks people face. That is what sets the period apart.

In answer to the member's question—

**The Speaker:** The hon. member for Charlotte.

**Mr. Greg Thompson (Charlotte, PC):** Mr. Speaker, with due respect, I disagree with the minister.

I want to go at it from another angle. Tuesday night there will be a confidence vote. If the government loses the confidence vote, obviously we move to an election. I am wondering what the theme would be of that election. Would they campaign on the theme of "The land is strong"? Remember that one in 1972? Would it be "Let them eat cake"? Or would the campaign theme be "Abandon the sick"?

What is the theme going to be of this upcoming election?

*Oral Questions*

**Hon. Herb Gray (Deputy Prime Minister, Lib.):** Mr. Speaker, I want to draw the attention of the House to the fact that the Reform members were wrong when they said they could give a commitment that none of the opposition members would treat this as a confidence vote.

An official spokesman for the Conservative Party just said that he considers the matter to be a confidence vote. Let the record show what the hon. member said.

My hon. friend is asking an interesting hypothetical question, but I believe that when we vote on this next week the resolution will be defeated and the government's position and the position of the ten provinces and the two territories will be upheld.

\* \* \*

[Translation]

**BANKING SERVICES**

**Mr. Benoît Serré (Timiskaming—Cochrane, Lib.):** Mr. Speaker, my question is for the Minister of Finance.

More and more bank branches are closing down in rural areas, and the people living in those areas are being forced to travel long distances in order to have access to banking services.

● (1455)

Can the minister tell the House what steps can be taken to lessen the problems being faced by our fellow citizens who live in rural areas?

**Hon. Paul Martin (Minister of Finance, Lib.):** Mr. Speaker, the hon. member's question is an important one. Moreover, it is an excellent example of why we have struck a committee to look into the future of the financial services sector.

I can assure you that we are going to take the necessary steps to guarantee that this matter will be settled properly. It is very important, and the government has made it perfectly clear that access to quality financial services in Canada's rural and outlying areas is of critical importance for the government.

\* \* \*

[English]

**INTERNATIONAL TRADE**

**Mr. Darrel Stinson (Okanagan—Shuswap, Ref.):** Mr. Speaker, the forest industry is already reeling from the decline in forest exports to Pacific rim nations, but more forest industry jobs are threatened by the new U.S. customs service decision to set tariffs and quotas on predrilled softwood imports.

What action is the minister taking to protect Canadian jobs in this industry?

**Hon. Sergio Marchi (Minister for International Trade, Lib.):** Mr. Speaker, we had a meeting and a conference call with the Canadian industry across the country because we have said that clearly we have an agreement that largely works. We will make no move in response to that customs agreement until we have been able to establish a sense of consensus within the industry.

The industry has also asked us for an additional period of a week, at which time we will be coming together again in Ottawa with representatives of the entire industry. If we can I think it would be very important to try to establish a consensus within the industry so we can march in the face of this decision in unity.

\* \* \*

[Translation]

**COURT CHALLENGES PROGRAM**

**Mr. Richard Marceau (Charlesbourg, BQ):** Mr. Speaker, my question is for the Minister of Canadian Heritage.

Francophone Saskatchewan is disappearing according to the Fédération des francophones de la Saskatchewan, which clearly contradicts the federalists who say that French is gaining ground throughout Canada. A key to the survival of francophones outside Quebec is the ability to appeal to the courts to guarantee their right to education.

Why is the minister refusing to improve the Court Challenges Program as she promised to do on March 18? Will she do as she did with the GST and break her promises?

**Hon. Sheila Copps (Minister of Canadian Heritage, Lib.):** Mr. Speaker, I totally and absolutely support the request of the francophone community in Saskatchewan that French be recognized as an official language in Saskatchewan and I recognize the same thing for all provinces.

Unfortunately, the secretary of state in a former government, now the premier of Quebec, who had the opportunity to do the same thing, never gave his support.

\* \* \*

[English]

**REFORESTATION**

**Ms. Louise Hardy (Yukon, NDP):** Mr. Speaker, my question is for the minister responsible for the Treasury Board. In 1995 the Elijah Smith Reforestation Fund was set up, but unfortunately there was a mix-up and no money is coming back to the Yukon for reforestation, which is particularly needed this year.

Will the minister fix the problem and make sure reforestation money comes back to the Yukon for work this year?



*Speaker's Ruling*

**Hon. Marcel Massé (President of the Treasury Board and Minister responsible for Infrastructure, Lib.):** Mr. Speaker, I will look into that question and give an answer to the hon. member as soon as possible.

\* \* \*

[Translation]

**HEPATITIS C**

**Ms. Diane St-Jacques (Shefford, PC):** Mr. Speaker, the Minister of Health has said he is prepared to let class actions determine the government's policy on hepatitis C. This is very worrisome.

Canadians have already seen the minister's prowess in other legal matters. The Airbus affair and Pearson airport are two examples that come to mind.

Is the Liberal government going to abdicate its responsibilities and those of all parliamentarians in favour of a court decision or will it allow Parliament to determine policy as it should?

**Hon. Allan Rock (Minister of Health, Lib.):** Mr. Speaker, the governments of Canada, including Conservative governments, decided to compensate the individuals infected during the period between 1986 and 1990, when governments and officials could have acted but did not. It was not the courts, but rather the governments that decided and accepted responsibility for the 1986 to 1990 period.

\* \* \*

• (1500)

[English]

**PRIVILEGE**

## INTERPARLIAMENTARY ASSOCIATIONS—SPEAKER'S RULING

**The Speaker:** On Tuesday, April 21 the hon. member for Fraser Valley raised a question of privilege concerning the government press release announcing the establishment of a Canada-China interparliamentary group.

[Translation]

The hon. member for Fraser Valley contended that, in issuing this press release, the Minister for International Trade gave the impression that this group would be sanctioned and funded by Parliament. He argued that this was a clear contempt of the House.

After hearing submissions from several members, I took the matter under advisement. I am now ready to proceed with a ruling on this question of privilege.

[English]

The creation of Canadian interparliamentary groups is governed by certain administrative bodies within the House of Commons and

the Senate. It is not an executive matter to be decided by cabinet. Although the government may from time to time make recommendations in this regard in the context of Canada's foreign policy, these matters do not fall directly within the purview of any government department or agency.

Interparliamentary relations are carried on under the responsibility of parliament. There are in place certain decision making processes governing their administration. As I mentioned on Tuesday, there are ongoing meetings this week and next week concerning these very matters.

• (1505)

It is the Speaker of the House of Commons who has the responsibility to represent the House in its dealings with foreign legislatures. For this reason, I feel it is my duty to comment on the actions taken by the Minister for International Trade.

In their submissions many hon. members made reference to the fact that actions such as these appear to undercut the authority of parliament. As parliamentarians we should all be aware of the differences between the authority of cabinet and that of parliament. In matters of foreign relations, cabinet may enter into agreements with other governments while parliament pursues relations with other legislatures.

Parliament's decisions are taken in light of Canada's foreign policy and the interests of all Canadians, but cabinet does not dictate the nature or scope of the interparliamentary relations of the Parliament of Canada.

In announcing the establishment of a Canada-China interparliamentary group and thereby prejudging a decision which has yet to be taken, the minister clearly overreached his authority. I am somewhat disappointed that a minister of the crown in acting with such haste may have prejudiced the very outcome that he wished to bring about. Such disregard for the administrative competence of parliament does nothing to enhance its prestige on the international stage.

Members have expressed their frustration over other announcements by the government which appear to bypass the authority of the House. As I have been reminded, this may have taken place on more than one occasion during this parliament.

There is reason for legitimate concern since it appears that a pattern is developing in spite of cautions which have been made from the chair. My duty however is to confine myself to the jurisprudence which exists and governs the operation of privilege.

[Translation]

Given the preoccupation over these matters, I would suggest that this particular issue must be handled through a different avenue, namely the Board of Internal Economy, which holds statutory responsibility for such matters. I noted during the discussion on

*Speaker's Ruling*

April 21, 1998, five of the hon. members who intervened were members of the Board of Internal Economy.

[*English*]

Until the board has been seized of this matter and pronounced itself on it, I wish to advise this House that there is no officially recognized parliamentary association with China. Consequently there can be no interim chairman either from the House or from the Senate.

I regret having to make this statement so publicly. I trust that our Chinese friends will understand that this situation is strictly an internal Canadian matter relating to the basic tenets of our primary law. Indeed I trust that our Chinese friends will have a better understanding of our parliamentary democracy as we pursue this dialogue.

**Mr. Randy White (Langley—Abbotsford, Ref.):** Mr. Speaker, I rise on a point of order. Have you referred the issue to the Board of Internal Economy? Do we table a motion in this House at this point in time?

**The Speaker:** This motion has been referred to the Board of Internal Economy.

**Mr. Chuck Strahl (Fraser Valley, Ref.):** Mr. Speaker, I rise on a point of order. I have only been here for four years. I have never seen this done. I was ready to make the appropriate motion which I thought was necessary if the minister had been out of turn, to refer this matter to the procedure and House affairs committee. If it is being referred to the Board of Internal Economy, that is your decision. My question is, is that a debatable motion or is it just a decision that you have made?

**The Speaker:** It is not a debatable motion. I decided that it was not a point of privilege for the reasons I gave. I am sure if the member reads over my decision he will see the reasons therein.

**Mr. John Nunziata (York South—Weston, Ind.):** Mr. Speaker, I rise on a point of order. The Board of Internal Economy while having jurisdiction and authority grounded in law is not a body that is open to the public. It is not a body that is open to members of parliament.

It would seem to me that a matter that is rightfully before the House can be referred anywhere and you would require an order of the House for that to happen.

• (1510)

Mr. Speaker, in your decision you have found a prima facie case of breach of privilege. The only thing you could do in my respectful submission is to allow the hon. member to put the appropriate motion and the matter should go based on jurisprudence to the appropriate committee of parliament which is open to the public and which is open to members of parliament to call witnesses. That is the appropriate way. It is not the appropriate way to simply sweep this matter under the carpet.

**The Speaker:** Colleagues, I thought that it was reasonably clear. I have ruled that it is not a prima facie case of contempt. I believe that this falls under the Parliament of Canada Act, under the purview of the Board of Internal Economy. That is the ruling I have made at this point. This point should sit where it is.

**Mr. Chuck Strahl:** Mr. Speaker, I rise on a point of order. Again, I have never seen this done. Could you quote for me what section of Beauchesne's or whatever you used to base that ruling on? As far as I know this has never been done before. If something is wrong, we have always referred it to that committee. I have never seen this done before.

Another point is there could be an argument that not all members are represented at the Board of Internal Economy. For example independent members are not. Since it was seized by the House, I am not sure how the board can deal with that. I am interested to know how that is done or under what rules it is done. I have never seen it done before.

**The Speaker:** My colleagues, as a general rule the Speaker does not give legal explanations for his decisions. I would be happy to pursue the discussion of the Parliament of Canada Act and this particular matter in private.

I did rule that there was not a prima facie case of contempt in this particular case. I would like to let the matter rest at this point and go on to the Thursday question.

I have a point of privilege from the member for York South—Weston.

**Mr. John Nunziata:** Mr. Speaker, with the greatest of respect, you made a decision. The conclusion is not consistent with the remarks in your decision.

You found that the minister was out of line. He issued a press release. It was inappropriate. You apologized. You commented to our Chinese friends that this is purely an internal matter. Then you went on to say that it was not a breach of privilege. It is inconsistent.

My point of privilege is that independent members are not represented on, nor are they permitted to attend meetings of the Board of Internal Economy. One of the complaints the public has had is that often the political parties sweep things under the carpet to be dealt with in the backrooms of this parliament—

**The Speaker:** The hon. member does not have a point of privilege.

**Mr. John Solomon (Regina—Lumsden—Lake Centre, NDP):** Mr. Speaker, I rise on a point of order.

With respect to establishing parliamentary associations, I am the whip for the NDP. We were in a meeting last night with one of the deputy speakers and the clerks. We were told at that time on an issue unrelated to this one that if a new parliamentary association is to be formed, it has to come from the members of the House to the interparliamentary committee, the committee which I am a

member of, requesting funding therefor. If we did not have the funds we would then forward it to the Board of Internal Economy.

● (1515)

With respect to my independent colleague, he does make a point which I think is important, and that is that if it is sent to an interparliamentary committee or to the Standing Committee on Procedures and House Affairs there is an opportunity for consideration of all circumstances around the particular question.

I am not saying we should do one thing or another, but I was informed yesterday the procedure was that it should go before the interparliamentary committee first and before the Board of Internal Economy second.

**The Speaker:** The hon. member is correct.

**Mr. Randy White:** Mr. Speaker, again because this is new to all of us I am wondering, in the interest of having all members in the House represented at such a meeting, is it possible for that one meeting to have the independent member present, or is it possible to exchange a position such as mine with having him there present?

**The Speaker:** As a general rule I as Speaker of the House represent the independent members on the Board of Internal Economy. If the Board of Internal Economy as a body wishes to entertain any other witnesses, it can do so.

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#### BUSINESS OF THE HOUSE

**Mr. Randy White (Langley—Abbotsford, Ref.):** Mr. Speaker, I would like to ask the government House leader the nature of the business for the remainder of this week and for the week following.

**Hon. Don Boudria (Leader of the Government in the House of Commons, Lib.):** Mr. Speaker, I congratulate my colleague on his very excellent question, which is no doubt the finest one asked today.

Tomorrow the House shall consider second reading of the environment legislation, Bill C-32. If necessary the debate shall continue on Monday.

When it is completed we shall call Bill S-9, the depository notes legislation. When that is finished or on next Wednesday, whichever comes first, we shall commence second reading of Bill C-27, the coastal fisheries legislation.

Once that is completed it is our intention to resume debate on the drinking water safety bill, Bill C-14. This would take place and continue on next Thursday.

#### *Business of the House*

Next Tuesday shall be an allotted day. In the evening we plan to hold a special take note debate on Bosnia.

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#### POINTS OF ORDER

VOTING

**Mr. Greg Thompson (Charlotte, PC):** Today in question period I asked a question of the government in relation to the vote on Tuesday night on the hepatitis C issue and I just want some clarification, Mr. Speaker. I hope you will give me a bit of time here. I think this clarification would probably best come outside question period and outside normal debate.

I want some clarification in terms of what the Prime Minister meant yesterday when he said that it would be a confidence vote. I am in favour of a free vote and I do not want people to imply that I was not. I feel that this vote has to come from the heart and it has to come from the independent judgment of members of parliament.

What did the Prime Minister mean when he talked about a confidence vote on Tuesday night?

**The Speaker:** I do not know how we can fit this into a point of order. It is surely a question that should be put to the Prime Minister in question period as we have that every day.

#### INTERPARLIAMENTARY ASSOCIATIONS

**Mr. John Solomon (Regina—Lumsden—Lake Centre, NDP):** Mr. Speaker, perhaps for clarification, you indicated that what I was told was accurate with respect to referring the creation of parliamentary associations to the interparliamentary committee. I am wondering if that is indeed what will happen, or will it go directly to the Board of Internal Economy.

● (1520)

**The Speaker:** It is my understanding that the Joint Interparliamentary Council will meet before we get it before the Board of Internal Economy.

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#### BUSINESS OF THE HOUSE

**Hon. Don Boudria (Leader of the Government in the House of Commons, Lib.):** Mr. Speaker, there have been discussions among the political parties and I understand there is agreement to defer the vote on this afternoon's motion, which would normally take place on Monday evening, to Tuesday. The motion would be as follows:

That at the conclusion of the present debate on today's Opposition Motion, all questions necessary to dispose of this motion be deemed put, a recorded division deemed requested and deferred until Tuesday, April 28, 1998, at the expiry of the time provided for Government Orders.

*Supply*

**Mr. John Nunziata:** Mr. Speaker, I rise on a point of order. I am prepared to give my consent to this matter on the condition that I am permitted my full allotted time to speak to the motion before the House today.

**The Speaker:** Who gives this guarantee?

**Mr. John Nunziata:** The House by unanimous consent, that I be given permission to speak today and that I be given my full allotted time.

**Hon. Don Boudria:** Mr. Speaker, I believe one of my colleagues approached the hon. member and provided him an assurance to that effect a little earlier today. If we have given our word, as I believe we have, that one of the slots provided for a Liberal member would be used by him, I would trust that the word given is accepted as being reality.

**The Speaker:** What we have is a miscommunication. The hon. member then gives his consent. Is that it?

**Mr. John Nunziata:** No, Mr. Speaker. I understood that I would only be sharing time with a Liberal member. I do not wish to share my time with a Liberal member. I wish to have my full allotted time, that being 20 minutes to speak in the House.

**Mr. Reg Alcock:** Mr. Speaker, if I may I will clear this matter up. I am the Liberal member who was designated to share time with the hon. member. I am quite prepared to give up my time.

**The Speaker:** Is the matter settled?

**Mr. John Nunziata:** Yes, Mr. Speaker.

**The Speaker:** There is consent and that is how we will proceed. Members have heard the terms of the motion. Is that agreed?

**Some hon. members:** Agreed.

(Motion agreed to)

**Hon. Don Boudria:** Mr. Speaker, in view of the Prime Minister's visit to Cuba and the people he was to have met on Tuesday, I am wondering if the House would give further consent to have this vote on Wednesday or what would be the disposition of the House.

**Mr. Randy White:** We have already said no to that.

**The Speaker:** That settles that little matter.

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## GOVERNMENT ORDERS

[English]

### SUPPLY

ALLOTTED DAY—HEPATITIS C

The House resumed consideration of the motion and of the amendment.

**Mr. Deepak Obhrai (Calgary East, Ref.):** Mr. Speaker, today I rise to speak not as a member of the Reform caucus and not even as a member of the House. Today I rise to speak as an individual Canadian who is witnessing thousands of his fellow citizens dying. They are dying while their government looks the other way. They are dying while their government uses cold, legal arguments and speaks of the need to make hard decisions.

They are dying through no fault of their own and yet the government says that it has had to make a hard decision. The government has not made a hard decision. The government has made a cruel decision.

• (1525)

Canadians put their trust in our national health care system and they through its mismanagement are paying the ultimate price. I am referring to the 20,000 to 25,000 individuals who were infected with the hepatitis C virus through the Canadian blood system prior to 1986 and today are either sick or dying.

While the government has chosen to compensate more than 28,000 who were infected after 1986, it has chosen to ignore the rest. It saddens me greatly that I must participate in a debate of this nature, a debate which could have been avoided had the government respected the rights of its own citizens. This is justice denied for a group that is rapidly running out of time.

Both the health minister and the Prime Minister are decent men and are fundamentally good people. However, on this issue I fear they are allowing their legal background to cloud their sense of compassion.

I ask them to reconsider their position and to afford some dignity to the thousands whose lives have been shattered. I ask all members of the House to cast their partisanship aside and vote to compensate all persons who contracted hepatitis C from blood products. We must act now because compensation and justice delayed are compensation and justice denied. This is especially true for thousands who will develop the more acute symptoms associated with chronic hepatitis C infection.

I have some notes but I will not read them. I will speak based on what I feel. I sat here this morning listening to the government side. I listened to the parliamentary secretary who talked most of his time about what the blood system of the future will be.

We are talking about people who were infected in the past. Not only that, I have a note from Larry Maheu who asks "What about victims after 1990 when the blood was supposed to be safe?" He was told by his doctor in Sunnybrook Hospital that the blood screening was not seriously done until 1993. What kind of situation did we have prior to 1986? What kind of a situation did we have from 1990 to 1993? What are we talking about?

Then another member talked about how hepatitis C was not serious when compared to HIV. Excuse me, the member should ask

the people with hepatitis C. They are sick, and he has the gall to say that is not a serious matter, that it is a matter of money.

Then the parliamentary secretary says that these people have the right to go court. What is this nonsense? Of course they have a right to go to court if they make the wrong decision. Is that the right decision? No. Government members are making people who are suffering go to court and suffer again. They are saying that there is compensation for some people and not for others. What nonsense.

I am amazed to see government members skirting the issue. Time after time as I sit in the House I am getting more and more depressed. We now have one Liberal member giving his time to an independent member. I am glad he did that, but we can see that he is running away from the issue because he cannot defend himself.

Then we have the Prime Minister changing the whole issue and saying that this is a confidence vote for the government, so that he can make his members vote not according to their conscience but according to the threat that they will go into an election.

• (1530)

As my colleague from Macleod said to Liberal members, all we are asking for is that they look into the eyes of those who are suffering and make a conscientious decision. We are telling them that this is not a confidence vote on the government. We are only asking them to make a morally right decision. That is all we are asking.

The government is justifying itself by saying it made this decision with 12 other ministers. Well, yahoo. As far as I know, before I was a member of parliament, this government did not listen to the provincial ministers. Now it is justifying this by saying that the provincial ministers have agreed so it must agree. That is not what Canadians expect from a federal government. Canadians expect the government to stand up for them and not hide behind what the provinces say. It is the government's responsibility because this is a federally regulated institution.

Let us assume for a moment that the Minister of Health's claim that nothing could have been done prior to 1986 is correct, although I know it is not. If this were the case then the government would not be responsible for the infection of Canadians prior to 1986 and, by the government's reasoning, there would be no need for compensation.

We have the principle that if the government was not at fault then it would not have to pay. Then why does the government spend tens of millions of dollars to compensate those affected by floods and ice storms? The government is not responsible for the weather, yet the government chooses to compensate those adversely affected by it. Maybe there are some politics behind this. Maybe there are more votes to be bought from those people than there are from the poor victims of hepatitis C.

### *Supply*

Perhaps a more compelling example is the fact that this government has chosen to compensate all tainted blood victims from 1986 on. The government's premise that it is not responsible for hepatitis C infection is wrong.

An essential aspect of leadership is to acknowledge when you have made a wrong decision. This is the time to acknowledge it. Premier Klein did it. Premier Harris did it. This government can do it too. It is a matter of compassion.

Why can this government not look beyond the legal arguments and do the honourable thing? Do not listen to the lawyers, listen to the people.

The Minister of Health is prepared to spend millions of taxpayer dollars to battle victims in court.

The minister claims that the health care system will collapse, that this will be a burden on the health care system. Really? If a small mistake is such a threat to the health care system then there is something seriously wrong with it.

I appeal to government members, including backbenchers. This is not a vote of confidence against the government, it is a vote that requires us to take a moral stand on a tragic issue. Let us look the victims in their eyes and tell them that they have our support.

• (1535)

**Mr. John Bryden (Wentworth—Burlington, Lib.):** Mr. Speaker, I presume from the final remarks of the member that members opposite consider this to be a free vote issue. I would hope that if arguments are presented to them which are cogent they would consider voting with the government when it comes to the test before the House.

I would like to draw the hon. member's attention to an analogy.

In 1986 there is no doubt that the Red Cross should have done something about the blood products because screening procedures were available and the whole issue about liability revolves on the fact that action was not taken at a time when it could have been taken.

However, I would point out to members opposite that there is a clear analogy between having this medical technology available in 1986 and not using it and not having it available to the victims of hepatitis C before 1986.

I draw the hon. member's attention to parallels like the Salk vaccine. Would he propose that those who had polio or who suffered from the consequences of polio should have been compensated by the government when the Salk vaccine was introduced? Is he suggesting that all those who were suffering from the disease before the arrival of the vaccine should have been compensated,

*Supply*

even though the vaccine was not available at the time they contracted the disease?

It is exactly the same with insulin. Diabetes was a great killer and a great maimer of people several decades ago. Insulin was discovered by Sir Frederick Banting. It became available. Do we assume that the government is therefore liable to all those people who suffered from the disease before the vaccine was available or before the medical technology was available to address that disease?

Penicillin is a great example. Penicillin was known and available but was not widely used by the medical profession when it could have been the answer to all kinds of diseases of the day. Does it mean because penicillin had been invented but was not widely available in all medical communities that everyone was liable because of something that was not yet in common use?

I hope they listen very carefully because we are coming to exactly the same situation now with antibiotics. The efficiency of antibiotics is deteriorating rapidly. Are we going to hold governments responsible if a specific antibiotic is prescribed for tuberculosis but no longer works? Are we going to hold the government liable for a failure of medical technology?

The government can only be liable when it can affect the outcome, when it can make the wrong decision that creates the liability.

As much as our heart goes out to those suffering who contracted hepatitis C before 1986, the reality is that the government could not have done anything about it at the time and, therefore, the government cannot be held accountable for it, in the same way that the government cannot be held accountable for all the polio victims and all the people suffering from tuberculosis who will not get a result from the vaccine.

**Mr. Deepak Obhrai:** Mr. Speaker, after listening to the hon. member's question I feel sick.

They are trying to defend something which is not defensible by coming up with ludicrous ideas. What has insulin to do with this?

This was a federally-regulated body that had tests, but people got infected. Insulin was discovered. What has insulin to do with this? Did a federally-regulated body have tainted insulin given to people? Is that what he is saying?

What we are saying here is very simple. We are saying that a federally-regulated body could have stopped this infection, possibly, had the power to do it and did not do it. There was negligence.

Compensation has to be given to everybody who was infected. That is the question. The motion today is to compensate everybody infected with hepatitis C.

**Mr. John Nunziata (York South—Weston, Ind.):** Mr. Speaker, I appreciate the opportunity to speak to this matter. It probably will

be one of the most significant debates that we will participate in during the course of this parliament.

• (1540)

Quite simply, the government's position on the hepatitis C question represents a betrayal of the Liberal principles and traditions of going to bat for innocent people, of going to bat for those who are unable to go to bat for themselves, of assisting those in need in this country. Liberal principles and traditions have driven Liberal policy for many years. One of the hallmarks of the Liberal Party, I thought, was one of being a fair and compassionate party. Now the government is turning its back on innocent Canadians who have been victimized not because of their negligence or oversight but because the system failed them.

How is it that the small country of Ireland which is one-tenth the size of Canada can have such a huge heart and provide compensation for all its victims of hepatitis C? Canada is 10 times the size of Ireland. How is it that the Government of Canada can be so heartless and cruel? How is it that a Liberal government can take the position it is taking?

I sat as a Liberal member of parliament for 12 years. I was a Liberal for many years before then. I was a Liberal when Pierre Trudeau was the leader of the Liberal Party of Canada and when he was the prime minister of Canada. Pierre Trudeau would never have taken the position that this government has taken. Former Prime Minister John Turner would never have taken the position that this government today is taking. Prime Minister King, Prime Minister Laurier and the entire list of Liberal prime ministers from Confederation on would not have taken the cruel and heartless position that this government is taking.

Liberals have been calling me from across the country. Rank and file Liberals, small *l* and big *L* Liberals, are saying to me that they are ashamed of being members of the Liberal Party when they see their government abandoning disadvantaged Canadians. Why does this government have a heart big enough, and rightly so, to compensate victims of the ice storm in Quebec and Ontario and to compensate flood victims in Manitoba and Quebec? Why does it have the political will, the political wherewithal and the heart to help those people, and yet abandon these 40,000 people? They are not losing property or chattels. They are not unemployed. These people will lose their lives. Their lives have been shattered as a result of the negligence of the Government of Canada and its agencies.

Their families will suffer. We are not only talking about the 40,000 people who have been left out, we are talking about their families. Their hopes and aspirations have been shattered. Give them some dignity. Tell them the government cares. Tell them the government understands what they are going through.

*Supply*

I wonder whether any of those Liberal members across the way know of any victims or whether they have any family who were victimized because of the tainted blood scandal in this country. Perhaps if they had a family member or if they themselves were inflicted they could understand the pain and suffering that is going on out there. I do not believe this government understands the magnitude of the suffering. It is a Liberal government and that is what is most disturbing. I know that many members across the way are deeply troubled by this.

What makes matters worse is that Liberal members are being told they must vote against the motion because it is a vote of confidence. What nonsense. What a bogus position to take. What does that mean? It means those Liberal members across the way will be coerced and threatened by the whip and by the leadership of the party. They will be stripped of their responsibilities if they do not toe the party line.

• (1545)

That is what is wrong with politics in Canada today. Those people across the way were elected to represent their constituents, to have some compassion, to be the representatives of their ridings. Eighty-seven per cent of Canadians according to a public opinion poll agree that all hepatitis C victims should be compensated.

Those Liberal members across the way who are going to toe the party line on Tuesday should be asking themselves who they are representing. Are they representing themselves because they want to be on a particular committee or they want to be parliamentary secretaries or because they want to be cabinet ministers? Are they representing themselves or are they representing their constituents?

If they succumb to the pressure of the whip to support the government and to vote against this motion, they are not only betraying the Liberal Party and Liberal traditions, they are betraying their constituents. There will be a political price to pay. I can assure hon. members across the way of that. They know in their heart of hearts that the right thing to do, the moral thing to do, the Liberal thing to do is to compensate all innocent victims. That is what Ireland is doing.

The Minister of Health, Mr. Compassion himself, a man who would be prime minister is refusing to show some of that Liberal compassion, that Liberal understanding which has made Liberal leaders great over the course of this century and since Confederation. He uses instead weak and bogus Bay Street arguments for which he was paid a handsome sum when he was a lawyer on Bay Street. He uses bogus legal arguments in order to deny innocent victims their rightful compensation. I say shame on him.

But is it his decision? Behind the scenes Liberal members of parliament say it is really the finance minister, that he made the final decision. He is the guy that controls the purse strings. These

are the people who support the Minister of Health. The supporters of the Minister of Finance say that no, the final decision was with the Minister of Health, that it was his decision.

It really does not matter because ultimately it is the Prime Minister's decision. If he wants to be remembered as his predecessors are remembered, as Mr. Trudeau is revered and honoured and remembered by Liberals and non-Liberals across the country, as are all his predecessors whom he often wishes to emulate, he would follow in the true traditions of the Liberal Party. He would open up his heart and provide compensation to all those people who are suffering.

The fact that this government is insisting it be a vote of confidence would suggest how bankrupt it is with respect to morality. If it was such a right decision, if it was the correct decision, if it was the moral decision, if it was the Liberal way of doing things, why has the government chosen to consider this or deem it a confidence motion?

If it is the right decision, members of parliament on the Liberal side would vote for it based on the merits because that is the right thing. They know that the backbenchers on the Liberal side of the House know it is the wrong thing. The only way the government can ensure Liberal members on the backbenches will vote against the motion and in favour of the government's position on the matter is by deeming it a vote of confidence, declaring it to be a vote of confidence and then threatening them like it threatened me. When I decided to vote against the budget two years ago the government said publicly in its talking points "he voted to defeat the government and on that basis he has to be removed from the Liberal caucus".

• (1550)

That is the same way the government is going to deal with members of Parliament opposite. Over the course of the remainder of this day and throughout the course of the weekend the phones will be ringing. The Prime Minister's office will be tracking down MPs in their ridings right across the country. They will be told that it is a vote of confidence and if the member votes against the government's position, if the member votes against the leader, the government is going to fall, so the member had better be there to vote against that motion. That is wrong. It is immoral, it is unjust and it is unfair. As I said, it is a betrayal.

The Government of Canada, a previous government, appointed a royal commission of inquiry. The government's position challenges the integrity of the royal commission itself. Mr. Justice Horace Krever in his report indicated "Until now our treatment of the blood injured has been unequal. Compensating some needy sufferers and not others cannot in my opinion be justified". Let me repeat that: "Until now our treatment of the blood injured has been

*Supply*

unequal. Compensating some needy sufferers and not others cannot in my opinion be justified". He is saying that the position of the Government of Canada today cannot be justified.

Justice Krever sat through many months of hearings. He heard witnesses. He looked into the eyes of suffering witnesses. He heard experts and he came up with the conclusion that to compensate some and not others cannot be justified. That is what the government is doing. It is compensating some and not others. Some 69,000 people were infected and only some 20,000 will be compensated.

When it came to other Canadians who suffered as a result of tainted blood, the HIV victims, the government did the right thing. It compensated everyone regardless of when they contracted HIV as a result of the blood system. That was the right decision. The government ought to be consistent and do the same for all hepatitis C victims.

Getting back to the Minister of Health, on April 29, 1996 he had this to say in the House: "The answer of course is that when there are resolutions as there are today involving victims rights, members of this party"—referring to the Liberal Party—"vote as they see fit. I already told the House this morning that I am going to be voting in favour of the resolution because I share the objectives expressed by the hon. member. I expect the other members of the government side will vote as they see fit".

What absolute hypocrisy. He speaks one way on April 29, 1996 with respect to a certain group of victims in this country and now he and his government are saying that members cannot vote as they see fit. They must vote as they are told, not based on what they believe to be right in their hearts, but based on the decision taken by the government.

The position of the government today is morally wrong. As the debate intensifies, Canadians will express their position in clear and certain terms. The Prime Minister often goes abroad and talks about the Canadian way, about how Canadians have compassion, how they are understanding and how they are tolerant. This is inconsistent. The government's position is inconsistent with the so-called Canadian way.

• (1555)

As I indicated earlier, the government over the years has seen fit to compensate victims whether they be flood victims, ice storm victims or unemployed fishermen in Atlantic Canada. The Government of Canada has also compensated Canadians who insulated their homes with urea formaldehyde foam insulation. Remember that? I suppose those people lost some monetary value to their homes and because of a government decision, the government felt it was morally responsible and therefore provided compensation.

How does the government reconcile these decisions to compensate some and not others?

What really bothers a lot of Canadians, what really irks a lot of Canadians is that this government finds money, some \$80 million, to hand over to Bombardier, one of the most profitable corporations in Canada. Yesterday it announced record profits, the most in the history of the company. People are writing their cheques as we speak to the receiver general as they complete their income tax forms leading up to the deadline. This is hard earned money made by hardworking Canadians and the Prime Minister hands over some \$80 million to a profitable company. How can that be justified? How can he hand over money?

Did it contribute to the Liberal Party of Canada? Does he have some friends, family or connections on the Bombardier board? I do not know. It boggles the mind how one set of standards can be applied to wealthy business friends and another set of standards applied to poor innocent Canadians who are suffering physically.

We are not dealing with a flooded basement here. We are not dealing with property damage. We are not dealing with urea formaldehyde foam insulation in homes. We are dealing with people who will die. They will die as a result of having hepatitis C, not because of their own negligence, not because of the negligence of their doctor. Had it been negligence on the part of their doctor, at least there would be compensation through insurance plans. They are going to die. Many will suffer.

A constituent who lives in my riding has written to me. I will not quote from her letter. I spoke to her a few days ago and she knows who she is. She is on Eileen Avenue in York South—Weston. She told me the impact this has had on her family and the uncertainty it has created for her, her children and her husband, the pain and suffering they are going through.

The Prime Minister, the Minister of Health and the Minister of Finance are okay. They will go home and sleep well. They are healthy. Their children are healthy. Their spouses are healthy. Do they know what it is like to live with the uncertainty of not knowing what the future might bring as far as their health is concerned? I think not.

I appeal to the Minister of Finance and to the Prime Minister of Canada, in particular to the Minister of Finance. I would ask him to look in the mirror and ask himself what would Paul Martin, Sr. do on this issue if he were the Prime Minister of Canada, a position that he aspired to and a position that the Minister of Finance aspires to. What would Paul Martin, Sr. have done? I think he will find that in his heart of hearts he knows that Paul Martin, Sr. would have done the right thing. He would have compensated all innocent victims of hepatitis C.



*Supply*

It is not too late for this government to admit it has made a mistake, that it will do the right thing and that it will compensate all victims. It is not fair that only the victims from 1986 to 1990 will be compensated. All victims should be compensated.

• (1600)

**Mr. John Bryden (Wentworth—Burlington, Lib.):** Mr. Speaker, the member made an allusion in his speech that party discipline on this side is governed by a punishment process whereby if we do not align ourselves with the government we may lose the opportunity for a free trip or a position as parliamentary secretary.

I understand from the member that he was a Liberal for 14 years. How many times did he vote against his conscience because he wanted a parliamentary secretary's job or because he was afraid he would lose the opportunity for a free trip? Come to think of it, how many free trips did this member take when he was a member of the Liberal Party?

**Mr. John Nunziata:** Mr. Speaker, that is absolute pure nonsense. That member opposite lacks the spinal backbone to represent his constituents.

In the years that I was in the Liberal caucus, whenever I was faced with a choice of voting on the basis of my conscience or on the basis of what was right for the leader of the Liberal Party, I always voted consistent with the best interests of my constituents. I do not know if he knows his history. On many occasions I voted against the party and the leader, whether it was on the Meech Lake accord, cruise missile testing or on cutting health transfers to the provinces. He knows that when I was a member of the Liberal caucus I did not suck up to the PMO the way he sucks up to the PMO.

**Mr. David Price (Compton—Stanstead, PC):** Mr. Speaker, after the member's 14 years experience in the Liberal government, what advice would he be able to give his former colleagues and backbenchers on how they might approach the Prime Minister this weekend to get him to change his mind?

**Mr. John Nunziata:** Mr. Speaker, very simply they should not even refer to the Prime Minister. The Prime Minister's office will be calling them. The whip will be calling them. When they have a difficult case the Prime Minister may be making those calls. If called, all they have to say is "I have a moral duty to represent my constituents. I want to do what is right. What is right in this case is to compensate all victims, not to pit one victim against another. I am prepared to suffer the consequences of doing what is right".

Ultimately the people who put these people in office will understand and separate those members of parliament who stand up for principle and those who do not. Just ask the people of York South—Weston.

**Ms. Angela Vautour (Beauséjour—Petitcodiac, NDP):** Mr. Speaker, I am in total agreement with the member on this side of the House. What is happening is totally disgusting. What we are seeing is a government that just does not care.

We often hear the government side saying that it did not know before 1986. I believe that in the Krever report it had been put on alert in 1981. Could the member confirm that for me?

**Mr. John Nunziata:** Mr. Speaker, that is where the Minister of Health and the government are being intellectually dishonest. They are misstating fact.

The fact is tests existed prior to 1986. Perhaps the tests as far as the Americans were concerned began in 1986. But Germany and other jurisdictions had tests. There were mechanisms. There were opportunities available to Canada in order to prevent the tragedy that occurred.

Regardless, we should be looking at a no fault system. We should not be looking at laying blame at the feet of an agency or government. We should understand that this is the largest medical tragedy in the history of Canada. We should be focusing our attention on providing compassionate and fair compensation to those who are suffering or will suffer as a result.

• (1605)

I urge the government to look at the Irish example, to look at the way the Irish government is treating innocent victims. It is making generous compensation available to all victims of hepatitis C regardless of when they contracted it as a result of the blood system. That is the model. That is the fair and compassionate way the government should follow.

**Mr. Dick Harris (Prince George—Bulkley Valley, Ref.):** Mr. Speaker, I am pleased to speak to this very tragic issue. I sat in utter amazement during question period today as I listened to members of the government stand up time after time and put their largest possible smokescreen forward to try to divert attention away from the fact that we are dealing with the government's failure to ensure that people who were getting blood transfusions were getting safe blood transfusions. That is what we are dealing with here. The government failed. It failed in the regulatory process to ensure that the health of Canadians was put first.

Government members have said there is nothing we could do about it. Prior to 1986 we had no means of testing. We did not know. Therefore how could we be responsible?

That statement, that premise, is an absolute lie. I know it. The Liberal government knows it. The Canadian people know it and most certainly the victims of the tainted blood know it themselves. They are having to live with it day after day.

*Supply*

How can this government, if it has one ounce of conscience, say it will take responsibility for those infected after 1986 but not those before? There is not one substantial piece of rationale behind that decision that anyone in the world could ever determine.

Once again the government has clearly displayed that it is morally bankrupt, that it would prefer to talk in legal terms, like the Minister of Health is so good at, and talk in dollars and cents and try to hide behind some decision it came to with the ministers of health of the different provinces. It thinks this somehow is the most important part of this discussion. It totally forgets that the most important part of this discussion is the people who were infected with hep C, the victims. They are the most important part of this discussion.

Why can the government not understand this? The government members do understand it. They know it. They know that the victims are the most important part of this whole issue but they will not recognize it because it is going to cost them money, because they say they have come to some agreement.

This is a very sad day for Canadians. It is a sad day when victims of hepatitis C who were infected prior to 1986 have to watch the Minister of Health, the Prime Minister and the Deputy Prime Minister say that prior to 1986 it is not their fault and therefore cannot be held responsible. They have to watch the government leaders stand up one after another and tell what they know is an absolute lie. Everyone knows that.

• (1610)

These are the facts. In 1981 the Red Cross rejected a recommendation from its own people to implement surrogate tests, the ALT test and in 1994 the anti-HBc test. A 1995 study revealed that their combined use would have lowered the incidence of post-transfusion hepatitis C by as much as 85%. In 1986 the Red Cross was aware this testing was being used but did not implement it in Canada. As early as 1978 the Red Cross was aware that non-A and non-B hepatitis was getting into the blood supply. It is unfortunate that Red Cross officials did not appreciate the significance and the long term implications but they knew it was happening. How can the government deny responsibility?

During this debate we can talk about the impact on the victims and about the moral bankruptcy of the Liberal government. I will address something the Liberal government has the audacity to stand behind. It has tried to cloud this issue by saying that it is simply a non-confidence ploy of the opposition parties to try to bring down the government. It has said that it cannot allow its own Liberal backbench members to vote the wishes of their constituents or of their consciences because this must be treated as a non-confidence motion.

I quote from something referring to opposition supply motions being treated by the government as non-confidence motions:

“This completely unnecessary and incorrect interpretation of the rules serves only to create greater frustration and partisanship and it is urgent that the standing orders be further amended to clarify that no opposition motion may be considered a matter of no confidence unless it specifically and explicitly indicates that it is intended to condemn the government”.

Nowhere in the motion of today is it specifically indicated that this motion is intended to condemn the government. This motion urges the government to respect the report of the Krever commission. That is a wonderful statement. It came from the Liberal plan for the House of Commons and electoral reform entitled “Reviving Parliamentary Democracy”. Liberal members will want to know who was among the signatories to this report, the person who is now their own House leader. At that time he was the assistant House leader.

Government members have the audacity to say that this is a non-confidence motion of some sort and that their members must vote with the government on it when in this report, which they prepared themselves and which their current House leader worked on and was an author to, condemned that very line of thought they are putting forward now. Not only is this government morally bankrupt by the way it is handling this case but its members by their statements today have displayed the highest form of hypocrisy I have ever seen in my life.

Only one thing can be done on this issue. This government must recognize the victims and award full compensation to all victims of hepatitis C, not only those it has put into this convenient little window.

• (1615)

I end my presentation today by appealing to the Liberal backbenchers to appeal to their hearts and their conscience that they would know the right thing to do when this issues comes up for a vote.

**Mr. Joseph Volpe (Parliamentary Secretary to Minister of Health, Lib.):** Mr. Speaker, I would like to make a couple of comments because as earlier on in the day, the debate has moved partially away from the issue at hand and on to political tactics. Political tactics are fine. They are partisan and everybody who watches this debate understands this is a side issue that does not have much to do with the motion.

On the substance of the motion, I am sure that all those following the debate want to be appraised of the issues at hand. The last speaker along with the other colleague from his party made references to federal responsibilities and leadership on the matter of infection. He will know and he will want everybody following the debate to have a full understanding of all the players who had a role in the management of the blood system.

*Supply*

I wanted to make some comments so I could have an opportunity to give them a full appraisal of the issue. He will recall for everybody who is engaged in the debate that one of those players, the one responsible for administering the blood system, as of this coming September will cease to have existed, the Red Cross, a venerable institution.

Second, the provincial authorities responsible for administering health care have also participated in this and have put forward a package for everyone to consider. I know—

**The Acting Speaker (Mr. McClelland):** The hon. member for Prince George—Bulkley Valley.

**Mr. Dick Harris:** Mr. Speaker, I cannot believe what I just heard. The Liberals themselves purposely moved this whole debate away from the issue of compensation. It was the cabinet ministers, the Minister of Health and the House leader, the Deputy Prime Minister and the Prime Minister who purposely moved this away from a compensation issue to hep C victims to a political issue. That is what happened.

We do have a full understanding that the Krever commission sanctioned and created by the Liberal government reported that all hepatitis C victims should be compensated. The government said it was going to accept that report only if it liked it.

[*Translation*]

**Mr. René Canuel (Matapédia—Matane, BQ):** Mr. Speaker, the government has really put its foot in it this time.

A terrible injustice has been done. I hope that the members of this government will understand that they have made a blatant error. I call upon them to recognize that error. Everyone makes mistakes, but they need to open their eyes to the injustice here. They need to say that it is not right for some people to receive compensation while others do not.

I ask my Reform colleague how they can be made to realize that they have committed an injustice and a mistake.

[*English*]

**Mr. Dick Harris:** Mr. Speaker, the recommendations in the Krever commission are very clear. He did not say compensate some of the hepatitis C victims. He said compensate all of them in the same way that he recommended a compensation of all the HIV victims.

• (1620)

The government has displayed a reprehensible attitude on this issue. I hope once again the backbench members of the Liberal Party will have enough good sense to look into their hearts and conscience and when this motion comes to a vote they will vote

what they really believe to be the right thing, not what their government whip tells them to vote.

**Mr. Derrek Konrad (Prince Albert, Ref.):** Mr. Speaker, it is really important to continue the debate on this issue. It seems we have not yet been able to change the government's mind on this and we hope to continue to raise the issue until we have it convinced it is wrong, that it is dividing Canadians into different groups on the basis that the day before yesterday some contracted hepatitis C and some did today and so they do not qualify for help.

In 1993 the federal government commissioned an enquiry to examine what happened, to look into the regulation, management and operation of the blood system. It issued a report and made some recommendations, among them that there should be compensation paid to those who suffered as a result of it. They are suffering. They are suffering a lot.

They have not come to Ottawa for a holiday. There is no place to take a holiday right now. They are here because they are hurting.

It is not our rhetoric that matters. It will not betray us for what we are. What betrays us is our actions. High flown words and intentions do not do anything. It is our actions that speak loudly.

The Minister of Health said: "We Liberals feel deep sympathy for those who were infected prior to January 1, 1986". That gets them nothing. They cannot take that to the bank. They cannot live it in health. They cannot work because somebody felt sorry for them. They cannot put their children through university. Their wife, who may end up being an early widow, that is not any help to her. It is not going to help them to and from hospitals and all the expenses. This makes me sick.

Eighty-seven per cent of Canadians want hepatitis C victims to be compensated for loss of health, livelihood, years of life, enjoyment and productivity. Canadians know what is right. Over there they do not know what is right.

What do they get from the Liberal government? Back alley brutality. I think it needs to be made clear just what constitutes the government in this country. When I came here as a rookie there were seminars held for rookie members of parliament. What did they say? In Canada we have the government within the parliament and particularly the government is drawn from the party with the most members elected. This time it was the Liberals. The way they are going it will be the last time.

I think it would be a real good idea if we painted all those chairs another colour so that those members of the governing party who are not members of the government would be able to see who they are and see what their relation is in policy development in their party. That way everybody would know. Everybody would be on the same line.

*Supply*

I want to draw a couple of parallels since our Minister of Health was in the previous parliament minister of justice. When gun control legislation came up, what did he do? He said it is the right thing to do. They set aside money for it. They have alienated half the country. There is a constitutional challenge on it. The government forged ahead in the face of all that opposition. It said \$85 million. Now it is up in the region of \$600 million. This has not stopped the government one bit from forging ahead with its plan to implement gun control. It is the reason the Liberals lost western Canada. It is the reason that the oppositions combined almost equal the government.

• (1625)

They acted on principle and money was no object. But now when it comes to hepatitis C and people have been hurt and they are going to be for life disadvantaged because of their illness, what is the response? Now it is political consideration. We have all the provinces on board. But the government does not have the people of Canada on board.

Yes, it has the provincial health ministers in line just as it is trying to line up its backbench supporters, but I bet a number of them will vote for this.

If the government wants to make this a vote of non-confidence that would certainly please us, but it is not to be a motion of non-confidence. As a previous member said, it is a motion to move the government to action. That is what we want to see.

Earlier when the Liberals were the government they compensated people who had the wrong kind of insulation in their homes because it might injure their health. There was a statistical possibility that it may have injured people's health. But did they know it was a dangerous product when they proposed that it be put in people's houses? Probably not. Did it matter? No. They removed the insulation and compensated homeowners for what was happening.

To get back to my Bill C-68 comparison, the gun control legislation applies not to criminals but to every Canadian who owns a gun. But here the government is saying that is too much to apply a law to those people who have been hurt by tainted blood products. That is all we are asking. Target this thing. The government does not have to pay everybody for everything. We want to see some compassion. There are compelling arguments for it and they have been made time and time again today.

We heard bogus arguments raised against it like tainted insulin, as if lack of having treatment was equivalent to mistreatment. That does not hold water. I cannot understand where the Liberals are going. As I said, they are not under a vote of non-confidence here but they are losing the confidence of the Canadian people. They

bring dishonour on this House if they enforce party discipline to defeat this supply day motion. I will be ashamed to be associated with this House if it fails.

I call on members from the governing party to join with the opposition members in doing the right thing and bring honour to this House by supporting the supply day motion next Tuesday.

I trust there will be a groundswell of support, that people will be phoning constituency offices across this country to show their support. I trust that the ministers' fax lines and e-mails will be loaded by Canadians letting them know, that their phone lines will be jammed and their mailmen will walk in like Santa Claus dumping mail on their office floors. That is what we want to see happen across this country between now and next Tuesday.

[*Translation*]

**Ms. Angela Vautour (Beauséjour—Petitcodiac, NDP):** Mr. Speaker, first off, I must say that I am in agreement with the motion introduced by the Reform member.

• (1630)

I must say, though, that I am a bit confused and I would like my colleague to explain something to me. Since I was elected, I have been hearing the Reform Party push the Liberals to cut and to cut some more. They are not interested in equity in health care or education. Now today we see them calling for equity for everyone.

I am completely in agreement with them that everyone affected should receive some compensation. I wonder why we cannot hear the same thing from the Reformers in the House about how there ought perhaps not to be different policies for the rich and for the poor of this country. That is something we often hear from the Reformers. They are pushing the Liberals so that we will end up with one health system for the rich and another for the poor. The same thing goes for education.

Can my colleague explain why today they have changed their tack and want everyone to be treated equitably? I wonder why they do not always support such ideas.

[*English*]

**Mr. Derrek Konrad:** Mr. Speaker, I did not think the member would be trying to make political hay out of this motion.

The Reform Party listens to Canadians. Eighty-seven per cent of Canadians want the victims of hepatitis C to be compensated. Also the Reform Party was founded on a set of principles and it acts on principle.

I reject the hon. member to the left of me making some sort of comparison. This is a policy many Canadians want implemented in the country. Something of this nature is doing the right thing. It is acting on principle which is supported by the people of Canada.

*Supply*

**Mr. John Bryden (Wentworth—Burlington, Lib.):** Mr. Speaker, I observe that the government is certainly acting on the situation in this instance. However it is controversial and there are feelings both ways. Even on our side there are some problems.

It cannot be anything but a confidence vote now because of the rhetoric from the other side. I allude to a speech by the leader of the NDP in which she said that the Canadian government now had the opportunity to act with compassion and end the battle being fought by the wounded. Then she said that instead of acting with fairness and justice the government has drawn an arbitrary line, et cetera.

When a government tries to do the right thing and the rhetoric comes from the opposite side saying that the government is acting without principle, there is no choice but to treat the motion as a confidence motion.

**Mr. Derrek Konrad:** Mr. Speaker, I will just quote his own health minister speaking in 1996:

The answer of course is that when there are resolutions, as there are today involving victims rights, members of this party vote as they see fit.

I already told the House this morning that I will vote in favour of the resolution because I share the objectives expressed by the hon. member. I expect that members on the government side will vote as they see fit.

**Mr. Sarkis Assadourian (Brampton Centre, Lib.):** Mr. Speaker, some people have mentioned that the intent of the motion was not to help the victim but to unite the right. Can he confirm if that is the case?

**Mr. Derrek Konrad:** Mr. Speaker, if this unites Canadians against what the government stands for on this issue, so be it.

[*Translation*]

**The Acting Speaker (Mr. McClelland):** It is my duty, pursuant to Standing Order 38, to inform the House that the question to be raised tonight at the time of adjournment is as follows: the hon. member for Bras D'Or, DEVCO.

[*English*]

**Hon. Herb Gray (Deputy Prime Minister, Lib.):** Mr. Speaker, I rise today to urge members to vote against the motion presented by the Reform Party.

The motion is about an agreement announced on March 27 and entered into by all of Canada's health ministers, that is to say, all 10 provincial governments, the 2 territorial governments and the federal government.

• (1635)

What does this agreement say? On March 27 Canada's health ministers announced that the federal, provincial and territorial governments were offering \$1.1 billion of assistance to Canadians infected by the hepatitis C virus during a time when some of these

infections might have been avoided had the Canadian blood system responded differently. The compensation offered is \$800 million from the federal government and \$300 million from the provinces.

All Canada's governments recognize the harm caused to a group of Canadians during the 1986-1990 period. The health ministers from all the governments involved representing four different political parties agreed it was right and appropriate to offer to assist these Canadians because during the period in question the Canadian blood system could have taken certain risk reduction actions but did not do so.

When governments provide financial assistance surely it should be in situations where government action or inaction resulted in harm. I am told, and I do not claim any expertise in these matters, that prior to 1986 there was no consensus in the international medical scientific community on how to accurately test for the virus then known as hepatitis non-A, non-B, which we now call hepatitis C.

What is very important is that the motion in effect expresses a lack of confidence. It attacks the decision not just of the federal government but of the 10 provincial governments and the 2 territorial governments. We are dealing with an agreement made by all of them. This is an agreement in which today all the provinces and the territorial governments, as far as I am aware, remain part of. They are steadfast in supporting this agreement.

The hon. member who just spoke suggested that the provincial governments were out of touch with their constituents. That is a strange comment coming from a Reform member. He is attacking, and I will be talking about this later on in my speech, the government of Premier Klein. Is he saying that government is totally out of touch with the people who elected it? Is he saying that the government of Premier Harris is totally out of touch with the people who elected it? I suggest it may well be on a number of issues, but the Harris government is steadfast in support of this agreement.

Clay Serby is not just the minister of health in the NDP Government of Saskatchewan. He is spokesman for all the provinces and territories on this issue. He said on April 7, according to the *Toronto Star*:

Provincial ministers, along with the federal health minister, remain committed to the deal announced in Toronto. As health ministers from every province, we worked together to reach a consensus on this very difficult issue. This was not an easy decision to reach. This is a very complex issue. We have come up with an approach that is national in scope, fair and reasonable.

Elizabeth Witmer, the Ontario minister of health in the Progressive Conservative government of Mike Harris, said on April 7, as quoted in the *Hamilton Spectator*:

There has been a very careful analysis and a decision was made. I support the decision that was made.

*Supply**[Translation]*

Here is what Jean Rochon, Quebec's health minister, said in a letter sent to our health minister on April 12, 1998. As you know, Mr. Rochon is a minister of the Parti Québécois, which is affiliated with the Bloc Québécois here in the House.

Mr. Rochon said "I feel that our program is justified and that we made a fair decision. Our respective governments have recognized that, between January 1986 and July 1990, action could have been taken to prevent infection, since a screening test was scientifically recommended during this period".

*[English]*

If the federal position is wrong, is the provincial position not wrong as well? Yet neither the Reform Party nor any of the other opposition parties in the House have said one word, not one one, to criticize the compensation agreement, the one entered into by all provinces and territories and their ministers of health.

- (1640)

As I say, if the federal position is wrong then why is the provincial position, taking part in the same agreement, not wrong as well? That is not what the Reform Party or the other provincial parties are saying.

The Reform Party has not criticized their friends and allies, Premier Harris of Ontario and Premier Klein of Alberta. They are especially careful not to say one word about Premier Klein's support of this proposal.

The last speaker talked about how the Reform Party is a party of principle. I thought one of the principles of the Reform Party dealt with federal-provincial relations. The Reform Party is quick to blame the federal government if it does not agree with the provinces because in the Reform's opinion provincial governments are closer to the people.

If that is the case, why does the Reform Party not listen to the provinces it usually defends on this issue? Based on its response in other cases, one might expect the Reform Party to congratulate the federal government for achieving agreement between all the provinces and listening to the views of the provinces.

*[Translation]*

The Bloc Québécois has not made a single criticism of the position of the Government of Quebec, its leader and the Bloc's former leader, Lucien Bouchard, or the Parti Québécois.

*[English]*

The NDP has not said one word of criticism against Premier Romanow and his NDP Government of Saskatchewan, not one word of criticism against Premier Clark and his NDP Government of British Columbia.

The Conservative Party in this House has not said one word of criticism on this matter against the position of the Binns Conservative Government of Prince Edward Island, against the Harris Conservative Government of Ontario, against the Filmon Conservative Government of Manitoba or against the Conservative government of Premier Klein of Alberta.

The opposition parties would have a lot more credibility on this matter if they used their opportunity to speak in the House to say something about the provincial governments they are allied with. They are not saying anything about the positions of those provincial governments.

They are not saying one critical word when they have had over and over again opportunities to do so. Of course they say things about the federal government's position on this difficult matter, but if they are to be considered credible why do they not get up in their place and say the same thing about the provincial governments?

**The Acting Speaker (Mr. McClelland):** If the hon. Deputy Prime Minister would excuse the Chair, is it the member's intention to split his time?

**Hon. Herb Gray:** Yes, Mr. Speaker.

**The Acting Speaker (Mr. McClelland):** In that case the Deputy Prime Minister has a minute and a half left.

**Hon. Herb Gray:** Please give me a firm signal when that point is reached.

By remaining silent in this way they show, for all their claims of support of free speech in this matter, that these claims do not amount to very much.

Why are members of the NDP not using their right to speak in the House about their Saskatchewan government which has not changed its position? Why do they not say what is wrong with this agreement?

The same applies to the Conservative Party in the House and its lack of criticism of its provincial allies.

*[Translation]*

Why is the Parti Québécois saying nothing?

*[English]*

This lack of criticism shows the weakness of the position of the Reform Party and the other opposition parties in the House. It shows that there is no real merit in their position.

Members in the House should consider carefully their position on this serious matter. When they do so, I think they will agree with me that members of the House should vote to oppose and defeat this Reform Party motion.

**Mr. Grant Hill (Macleod, Ref.):** Mr. Speaker, the Deputy Prime Minister says that there has been no criticism levelled at the provincial governments. It is funny that a federal member of

*Supply*

parliament, facing the federal government that has the primary responsibility for being the policemen of the blood system, would criticize someone else.

The federal government has \$800 million in the compensation package compared to \$300 million from the provinces. Let me make very clear that the federal government is the main culprit in this issue. It deserves the main criticism in this issue.

• (1645)

I have a quote from Krever and this says it plainer than I could concerning the federal bureau of biologic:

During the 1980s, the bureau did not decide independently whether to use its authority to require that measures be taken to reduce the risk of non-A, non-B hepatitis. Instead, it relied heavily on information given to it by the Red Cross—

The very organization it was supposed to regulate.

That is why the federal government is being so criticized for this foolish decision.

**Hon. Herb Gray:** Mr. Speaker, I understood the provincial governments all during this period were partners with the federal government in the blood system. If the federal government is the only one to blame then why did the provincial governments join in the agreement? They joined in the agreement because obviously they felt they had some responsibility. The Reform member does not have the courage to get up in this place and point the finger when it should be pointed at provincial governments instead of just pointing it at the federal government.

**Mr. Peter Stoffer (Sackville—Eastern Shore, NDP):** Mr. Speaker, I have tremendous respect for the Deputy Prime Minister after following his career over the years. But as a new member in this House I am ashamed of what he is saying.

He knows damn well this is a federal agency that is responsible for the hep C victims and he also knows damn well there has been \$7 billion cut from health care and that is why the provincial governments were coerced into this agreement. That is exactly why these governments have been sucked into this deal by the federal government.

It is the federal government that should be showing leadership on this, not the provinces.

**Hon. Herb Gray:** Mr. Speaker, we have a federal system where provinces have their authority and the federal government has its authority. In some cases there is overlap and they have to co-operate.

Is he saying Premier Romanow is a wimp and could be coerced by the federal government? Is he saying that Premier Clark of B.C. is a wimp on this matter and can be coerced by the federal government? That shows the lack of credibility in his position. If

they did not think they had some responsibility and that the agreement was right, those provincial allies of the hon. member would not have joined in. We know that to be a fact.

**Mr. Derrek Konrad (Prince Albert, Ref.):** Mr. Speaker, something really struck me when the hon. Deputy Prime Minister began speaking.

He said he urged the members of this House to vote against the motion. I wonder if I can take that to mean that is all it is, urging his own members, or is he simply urging the opposition or are they applying caucus solidarity on this thing? It is an interesting word he used. Have they withdrawn from their position that this is a vote of confidence and they are enforcing party discipline?

**Hon. Herb Gray:** Mr. Speaker, I am looking the hon. member in the eye and I am saying he is wrong and I urge him to vote against this motion. I say that to all members of the House but principally I am facing the opposition members because we have stated our position as a party. We believe in it and we stand by it.

**Hon. Allan Rock (Minister of Health, Lib.):** Mr. Speaker, I have listened to today's debate with great interest but one striking feature of the debate in the House today is that among those who have spoken in favour of this resolution, not one hon. member has confronted the true question at issue.

The true question is whether governments should make cash payments to those who are harmed through no fault of anyone but because of risk inherent in the medical system.

I intend in the few moments permitted me to deal with that question and to examine it. In doing so I urge all members to put aside the rhetoric, put aside the inflammatory words and the high sounding language of fairness and moral duty and instead confront the real question.

It seems the opposition parties have failed to confront that real question. They paper over that question because it is very tough. It is a very difficult question to answer. Ministers of health of this country came to grips with it some weeks ago and we concluded that we had a position on when governments should pay cash payments to those who are injured through no fault of anyone but because of risk inherent in the medical system.

The easy course, naturally, would be simply to pay those who are making a claim upon the government. Ministers of Health are custodians of Canada's health care system and we have a larger responsibility, a responsibility to show leadership on these tough questions and confront them directly, no matter how difficult they may be.

• (1650)

This issue is larger than just those infected with hepatitis C. Hon. members know that every year there are thousands of people in this

*Supply*

country who are adversely affected by the health system through no one's fault but because there are risks inherent in it.

Last week researchers identified what they felt was a source of many deaths in hospitals every year because of adverse reactions to prescription drugs. This was brand new research and they said the figures in Canada are staggering.

We all know there are those who have adverse reactions to vaccines, anaesthetics or to prescription drugs or who have high risk births delivering babies with brain damage who will need special care for a lifetime.

In the absence of fault, if it is a risk inherent in life or in delivering medical services, where is the obligation of governments to pay cash to those who are harmed in that way? That is at the root of this difficult issue. This is not the first time we have had to confront that issue.

In 1990 governments in Canada, because they were concerned by the rates of medical malpractice insurance by doctors and the number of claims for compensation, established a commission that was chaired by Dr. Robert Prichard who is now president of the University of Toronto. The Prichard commission was made up of distinguished Canadians, including the then dean of medicine at McGill University medical school, Dr. Richard Cruess, Madam Justice Ellen Picard of the Superior Court of Alberta who has written a definitive text on hospital and doctor liability, and Dr. Gregory Stoddart, one of the leading health policy analysts of this country. What did they conclude? They concluded in their recommendations the following:

We recommend the development of a no fault compensation scheme for persons suffering significant avoidable health care injuries.

We recommend that the general criterion for determining which significant medical injuries are compensable under the compensation scheme should be the test of avoidability. That is, the principal inquiry to determine if an event is compensable should be whether, with the benefit of hindsight, the injury could have been avoided by an alternative diagnostic or therapeutic procedure or by performing the procedure differently.

They specifically recommended that the same test be applied to those who are injured through the blood system. That is exactly what the ministers of health have done in this instance.

We looked back over the chronology of events and asked when was it, in all that happened, that these injuries were avoidable. So when is it that no fault compensation should be offered? History shows on the balance of the evidence that it was between January 1986 and 1990 that avoidable element occurred.

It is true to say there were tests here and there in different parts of the world and in different states earlier than that but broadly speaking, the evidence of those who know is it was by January

1986 that steps should have been taken. They were not. That is when the avoidable injuries occurred.

What should governments do about people before 1986? What should we do about the victims who suffered the unavoidable injuries by virtue of risks inherent in the health system before January 1986? Among other things we should focus research on trying to find ways to treat and hopefully cure the infection. I have asked the chair of the Medical Research Council to take whatever necessary or appropriate to focus research priority on hepatitis C.

We must also do whatever we can to minimize risk in the future. We will be accepting the recommendations of Mr. Justice Krever in terms of the federal watchdog role, putting into place more elaborate controls over the safety of the blood system in the future. I will be coming back to this House with more particulars on the steps we are taking in that regard.

We must accept responsibility for that period when the injuries were avoidable. That is why we are contributing \$800 million as a federal government to a compensation fund which will total \$1.1 billion, more I hope if the Red Cross joins us, offered to those in the category who suffered injuries that were avoidable, 22,000 plus victims in that category. That was on the agenda because of federal leadership. It was only in the last year that the federal government put that agreement together among all the provinces.

It is easy today to suggest that we should simply write a cheque for all those who demand it. We are responsible for maintaining a public health care system in this country and it will not be sustainable if we simply pay cash to all those who suffer harm not through anybody's fault but because of risks inherent in the system. That is what happened here before January 1986.

● (1655)

When we hear the colourful language from the opposition parties today, when we hear them talk about our duty to the sick and the vulnerable, when we hear them talk about our moral duty, let us remember that as custodians of Canada's health care system we have no greater duty than to ensure that medicare is going to be there for those who are sick when they need it.

We have no greater moral responsibility than to safeguard medicare for the very hepatitis C victims who will require treatment as they develop symptoms and their condition deteriorates. We have no greater obligation of compassion than to ensure that our public health care system remains affordable and sustainable.

We shall not do it if we follow the course suggested by the other side because next month or next year there will be others who come forward with claims equally as compassionate, with demands equally as desirable, equally as emotional and they too will want money. Where will it end? It will end with governments paying out



cash compensation regardless of fault to all who have an emotional claim and will end with a country unable to afford or sustain its health care system.

The moral high ground does not rest with those who urge that easy course. The true moral high ground is with those on this side of the House with the courage to stand and say we will take the tough decision on the difficult question we face. The true moral high ground rests with those in the government who will stand in their places next Tuesday and vote against this motion not because we are callous, not because we lack compassion, but because we are responsible for a public health care system that cannot and will not continue if we take the course the opposition urges.

I encourage all members of the House to consider the implications of this difficult and wrenching dilemma but to confront the real question that lies beneath it. Can we sustain our public health care system if we make cash payments to all those who are harmed by the health care system, regardless of fault, merely because of the risk inherent in the process?

Infection with hepatitis C through the blood system was just such an inherent risk before January 1986. As a result I say we should conduct research, we should do whatever we can to prevent such injury in the future, we should accept responsibility for the period when we should have acted, but I oppose this motion because it is not the proper policy.

**Mr. Grant Hill (MacLeod, Ref.):** Mr. Speaker, it is interesting to hear the legal arguments from the health minister. I note publicly that the minister referred only to legal precedents on this issue.

I accept his point that government should not pay cash compensation to people who are injured when there is no fault. No fault, no compensation I accept. But in this instance can anybody convince me that there was no fault, can anybody convince Judge Krever, our premier expert on the blood system, that there was no fault? He said it plainer than I could ever say it. The federal government regulator failed the public.

All I will say is that Krever is our expert. The health minister has turned down his expertise. He says that the members in this House will not vote for this motion because it is the right thing to do. I say the Liberal members will not vote for this motion because they are being coerced and forced and pushed into the hole. Argue with that if they will but every single person in Canada knows that is true. If it is not true, take off the whip.

**Hon. Allan Rock:** Mr. Speaker, in view of what the hon. member has said, I urge him to withdraw his motion. If he limits the entitlement to cash compensation to those circumstances where government was at fault, then he ought to withdraw his motion. If he reads the Krever report he will see that the weight of the

### *Supply*

evidence had that it was January 1986 onward that Canada should have acted. Before January 1986 there was no fault on the part of government. The hon. member knows it.

That is why Mr. Justice Krever recommended no fault across the board. We do not accept that. But the hon. member has just conceded the point on this motion and he ought to withdraw the motion.

• (1700 )

**Mr. Greg Thompson (Charlotte, PC):** Mr. Speaker, I support entirely what the member for Macleod said. The minister is attempting to use a legal argument to get rid of this so his responsibility will disappear. At the end of the day it falls at the doorstep of the Minister of Health. There is only one national Canadian Minister of Health and he is dodging the bullet. He prefers to put the blame on someone else. However, at the end of the day he is charged with the safety of the Canadian blood supply system. It is as simple as that. He cannot dodge that bullet.

I hope that members on the other side of the House will ignore the threat or the stick being held over them, or, as the member said, the whip that is being applied to them to bow in and vote with the government on Tuesday night. The minister is being surrounded by a ragtag assortment of supporters; just simply a handful. There are 150 empty seats over there and they do not support the minister on this issue.

**Some hon. members:** Oh, oh.

**The Acting Speaker (Mr. McClelland):** First of all, we do not refer to members who may or not be here, and when we do refer to each other we refer to each other through the Chair.

**Hon. Allan Rock:** Mr. Speaker, what is striking about the intervention is that the hon. member will not deal with the tough underlying issue. He will not confront the question. I put it simply. When should governments pay compensation? Should they pay cash compensation to those who are harmed through the medical system not through anyone's fault, but because of the risks inherent in the medical system? The member will not answer that question.

He accuses me of having a legal analysis as if it is some sort of condemnation. The Prichard committee in 1980 was not a legal analysis. It was made up of health care experts who understood health policies. Their recommendation was to do exactly what ministers have done in this case, which is good public policy.

The member will not confront the question because he knows where it leads. It leads to the conclusion that this motion is ill-founded and inappropriate. The very person who moved it, the hon. member for Macleod, has conceded that it is without foundation. He has conceded that if there is no fault there should be no

*Supply*

cash payment. The history of this matter shows that he has just cut the ground out from under his own motion.

**Mr. Peter Stoffer (Sackville—Eastern Shore, NDP):** Mr. Speaker, I am pleased to have the opportunity to rise on this motion about which I and my party are deeply concerned and will be supporting on Tuesday night.

I wish to refer to what we have heard in this House today. We have heard that people with hepatitis C lead normal lives. We have heard that people with hepatitis C who will not be compensated can go the CPP disability route. We have heard unbelievable statements from the other side of the House today that the provincial governments should show leadership in changing the government's view on hepatitis C.

These statements are absolutely unbelievable, coming from so-called educated people on the other side whom we call Liberals. History will prove that this government is probably one of the cruelest, craziest and silliest governments of all time. History will prove me right on that.

It is just unbelievable that the Minister of Health can stand here and deflect like a stick-handler in hockey. Unfortunately he cannot score. He never has and he never will. The unfortunate part is that there are 40,000 people and their families who are infected by hepatitis C who will not be compensated. He stands there and says they have emotional claims. When people die, when people get sick, when people are injured by this disease he says they are basing their arguments on emotion only. He would not know a hepatitis C victim if that person lived in his basement. It is most unfortunate.

I have a few questions to ask the minister, if he ever cares to answer, in letter form, privately or whatever.

Does he agree with his parliamentary secretary that people who do not have hepatitis C compensation can go the CPP route? I know in my riding that hundreds of people try the CPP disability route and it takes years to get processed. In the end, when the tribunal awards it to them, the Minister of Human Resources Development can turn around after 90 days and deny the claim.

• (1705 )

My colleague from northern Saskatchewan was in this House and presented a compelling question to the Minister of Human Resources Development. It was about a young man of 26 years who had no legs and was missing an eye. He was denied CPP disability. If an individual of that nature can be denied CPP, how in the hell can they stand in this House and tell us that people who have hep C can go—

**The Acting Speaker (Mr. McClelland):** I have no idea how he is going to know, but he is not going to know using that language.

**Mr. Peter Stoffer:** Mr. Speaker, I apologize. I will refrain from using such strong language.

It is only because of my strong feelings on this particular issue. I feel that everybody with hep C in this country should be duly and fairly compensated. With that remark I will end my comments.

**Mr. Monte Solberg (Medicine Hat, Ref.):** Mr. Speaker, I have listened to the debate today with considerable interest.

Obviously it is an issue that has gripped the country. People are quite aware of the issue now. They have followed it very closely and I think that Canadians are always compassionate.

When we look at the facts in this case we cannot help but support the position taken not only by the Reform Party but by all opposition parties. I should pay tribute to members of all parties who have spoken today in the interests of standing up for Canadians. I say that of members of the opposition.

Let us go back through the chronology. In October 1993 the government appointed a commission. It appointed Justice Krever to look into the contamination of the blood system. We had an interim report in February 1995 and a final report in November of last year. In that report Justice Krever made the recommendation that all victims should be compensated.

We know, for instance, that AIDS/HIV victims going back to 1978 were compensated. They were all compensated. Justice Krever has made the judgment that all of the victims of hepatitis C should also be compensated.

I point out to the health minister that it is the justice who this government appointed who is making that recommendation. It is not another government, it is his judge who chaired the commission to bring forward these types of recommendations. We are simply pointing out that it is the government's own committee with its own expert review that has made these recommendations. We are simply asking them to listen to Justice Krever's advice and to do as he suggested.

It is not only in Canada that this advice has been followed. We have heard over the last couple of days how the Government of Ireland eventually had to yield to considerable public pressure because of the public's superior moral conscience which forced its government to pay compensation to all victims.

I would urge the government to listen to its own conscience and to finally come around to the point of view that it must start to compensate all victims.

The government has drawn an arbitrary line. It says January 1986 is the point at which it will start to pay compensation. As other members have pointed out, in other parts of the world testing was already under way, going back to 1981, which would have detected hepatitis C.

I point out in response to questions from the health minister that when a federal body takes on a responsibility to regulate something like the blood system, implied in that is responsibility and culpability. When the federal government steps in as a regulator the public has the right to assume that the government is taking all reasonable steps to ensure that it is doing its job, that it is getting the best possible information and that it is reaching out around the world to find out, in this case, whether or not there are tests available to determine whether there are things like hepatitis C lurking in blood. It did not do that and it should therefore be culpable. It is that straightforward.

• (1710)

The justice minister wants us to absolve the government of all blame. He is essentially justifying not paying compensation on the basis of the tardiness of the regulating agency to use other tests that were available around the world. The regulating agency was responsible for not utilizing all the available means to ensure that the blood system was safe. If it did not take those steps, then it is culpable. It is that straightforward.

I say in response to the health minister's speech of a few minutes ago that the regulating agency simply did not do its job. It simply did not use all available means at the time, which is why Justice Krever ruled that everybody should receive compensation.

The second point I want to go to is the idea of a free vote. I say to the health minister, the former justice minister, that if he is so convinced of his position, then allow this issue to go to a free vote. If he really believes that the federal government has no more responsibility previous to 1986 then let us ask him to put his position on the line with his own members. If he really believes in that, let us ask him to put his position on the line. Does he not trust his ability to make a persuasive argument to his own caucus? Let us let the people's representatives make that decision.

Today in the House we know that the leaders of the respective opposition parties got up and said "We do not view this as a vote of non-confidence. This is not a confidence motion".

We also know the government has spoken in the past. It has written volumes about how it would allow more free votes. We view this issue as a moral issue. We say that this is an issue whereby the public should have the right to be represented by their representatives in the House of Commons. Let us have the government now finally put its money where its mouth is. Let us have it actually bring this motion to a free vote in the House of Commons on Tuesday.

We know there is a three line whip. People are being called back from all over the country. They are being told to be here, not to vote freely, but to vote against the motion, to vote against their own

consciences, to vote against what their constituents are telling them.

No matter what theory of representation they believe in, they cannot possibly believe in one whereby the government says "it is my way or the highway" irrespective of what the public is telling them, irrespective of what their conscience tells them, especially when opposition party members have said they do not view this as a confidence motion.

I conclude my remarks by saying that if the government truly believes it is on the moral high ground here, then let us put this issue to members in a free vote. That is the true test. That is the real way to find out whether or not the government's arguments have carried the day. Because if those arguments are as persuasive as the health minister thinks they are, the government will have no problem carrying just a very few members on the government side that it will need to win the vote.

**The Deputy Speaker:** It being 5.15 p.m., it is my duty to interrupt the proceedings.

[Translation]

Pursuant to order adopted earlier today, the questions on the motion are deemed to have been put and a recorded division is deemed to have been requested and deferred until Tuesday, April 28, 1998, at the conclusion of Government Orders.

• (1715)

[English]

Is it agreed that we call it 5:30 p.m.?

**Some hon. members:** Agreed.

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## PRIVATE MEMBERS' BUSINESS

[English]

### COURT CHALLENGES PROGRAM

**Mr. Maurice Vellacott (Wanuskewin, Ref.)** moved:

That, in the opinion of this House, the government should withdraw all funding from the federal Court Challenges Program.

He said: Mr. Speaker, the Court Challenges Program by way of background is an independent corporation based in Winnipeg that receives \$2.75 million of public money every year. It distributes this money to interest groups so that those groups can then argue their views on the meaning of the charter of rights and freedoms in the courts.

In the 1994 contribution agreement between the program and the government, the overall objective of the program is very carefully stated. It says "the objective of the program is the clarification of constitutional rights and freedoms". Note the word clarification.

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The Court Challenges Program was not charged with the task of advocating specific interpretations of constitutional rights and freedoms. Its role in this process of clarification was to be a relatively minor one having to do with money. It was to provide interest groups with the money needed to present their charter interpretations in the court. Obviously, the judges are the ones who by their rulings must do the actual work of clarifying Canadians' rights and freedoms under the charter.

The problem with the Court Challenges Program is that it does not know its place. Its ambitions go well beyond its mandate. It is not content simply to handle the money side of things and let the courts decide the merits of various arguments. It has set itself up as judge and jury over the interest groups that apply for funding. For example it has been very welcoming to groups that promote gay rights, socialism and radical feminism. But interest groups that bring contrasting viewpoints to the courts, viewpoints which judges need to hear in order to render informed decisions are denied funding altogether.

The Court Challenges Program thus violates section 8.3 of its contribution agreement which says that the program shall fund a broad range of individuals and groups. The program has been anything but broad and inclusive.

This kind of blatant bias is made possible by the lack of adequate, unambiguous criteria for funding decisions. It often happens that when governments decide to fund interest groups, they are unable to answer the question: On what basis did you support one group and not another? In the absence of clear criteria, there is no other way for funding decisions to be made than in an ad hoc way which leaves too much to the discretion of the person who happens to be making the funding decisions.

In a 1992 study undertaken at the request of Consumer and Corporate Affairs Canada, four researchers concluded that various strict procedures needed to be followed in the process of determining which groups would receive government funds. Among those procedures was a process for arriving at some fair criteria for funding decisions. It involved four stages.

The very first stage was that of writing a draft statement of criteria. The second stage was the distribution of that to all affected parties, stakeholders. The third stage was the unbiased consideration of comments on those proposed criteria from the affected parties. Last was the publication of the final criteria.

The authors write that at a minimum, what seems to be required is clearly articulated rules, which are applied equally to all with a stake in the activity and administrators who are obliged to adhere to those rules.

The Court Challenges Program is a notorious transgressor in this regard. Its criteria for making decisions are extremely vague and are therefore susceptible to manipulation by the Court Challenges Program's obviously biased decision makers. Most importantly,

since the Court Challenges Program can only fund cases that deal with equality rights under sections 15 and 28 of the charter, the Court Challenges Program decision makers have taken it upon themselves to in effect define what that equality means when clearly that should be left to the judges.

How is it that the Court Challenges Program could be as biased as I am saying it is? The reason for such consistently biased funding decisions is clear. The members of the Court Challenges Program board of directors and also of its equality panel which makes the actual funding decisions are also members of those very same groups that wind up getting funded.

● (1720 )

It is a very clear conflict of interest. The organization has no checks and no balances that would serve to guard it against partisan and biased decision making. Instead the government has written these groups a blank cheque by giving them control over the organization that disburses public money for charter cases.

Let us look at an example of an interest group that has been treated unfairly, in order to highlight the bias at the Court Challenges program. REAL Women of Canada is an organization whose approach to women's equality seeks to be sensitive to the needs of other members of society, including unborn children. On many issues, their view contrasts with that of the Women's Legal Education and Action Fund or LEAF for short. Time and again, REAL Women has been denied funding by the Court Challenges Program while LEAF has been consistently handed out cheques.

There have been six court cases in which both groups participated on opposite sides of an issue. In all six of those court cases, LEAF's bills were paid by the Canadian taxpayer via the Court Challenges Program but REAL Women had to struggle to scrape together the necessary funds.

There is no logical reason for this inequality and discrimination against the group REAL Women. Regardless of what one thinks of the views of this group, it is clear that its positions on various issues are representative of the views of a large number of Canadian women. How large that number is is not my present concern, but it is clear that the Supreme Court has regarded this organization as worth hearing in court since it has consistently granted REAL Women intervenor status. Yet the Court Challenges Program whose equality panel is cut from a different ideological cloth than REAL Women has consistently refused to grant funding to REAL Women.

What is most shocking is the written response the Court Challenges Program gave to REAL Women after the group applied for intervenor funding in the Borowski case. Here is how REAL Women describe what happened in a letter written this year concerning a period in the mid-1980s: "In its refusal the Court Challenges Program stated that our view"—REAL Women's view—"of equality was not in accordance with the accepted and current understanding of equality both by society and the courts.

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This was back in 1987 when the courts had barely dealt with equality issues under section 15 of the charter which came into effect only in 1985”.

Only two years later and the response is that their view or understanding of equality does not fit the set understanding of equality in society and in the courts. Two years later. It is really quite a far stretch to imagine that it would already be that set at that point. “To add insult to injury, the Court Challenges Program enclosed an analysis or critique of our Borowski factum written by Rosalyn Curry, a member of LEAF, which was opposing us in the case”.

Imagine. The Court Challenges Program wanted an expert to examine REAL Women’s application for funding and just happened to choose a lawyer who was a member of LEAF, REAL Women’s arch rival.

The Court Challenges Program is clearly usurping the role of judges by deciding whether or not a group’s legal arguments have merit. They have appointed themselves the justice system’s gatekeepers on charter cases of crucial significance.

There is other disputable evidence of bias at the Court Challenges Program. Quite tellingly when the courts have not ruled in favour of one of the Court Challenges Program’s favourite groups, the program’s literature subsequently portrays that decision as a great setback for justice and equality. That makes it clear that the Court Challenges Program is not interested in letting judges clarify the rights and freedoms we have under the charter, which is their mandate, their reason for existence. Rather the organization is itself an advocacy group whose true objective is to help its friends in the left wing advocacy business.

That was even acknowledged publicly by one of the funded groups EGALE, Equality for Gays and Lesbians Everywhere. In their newspaper *Capital Extra*, they told their readers as recently as November 14, 1997 “federal funding for the Court Challenges Program means that you have an advocate”. It does not get much clearer than that, straight from the mouth of the gay lobby.

• (1725)

I would like to raise a question which I find interesting concerning how the Court Challenges Program might fare if it were ever itself subjected to a court challenge. I enjoy thinking about this. A 1994 supreme court case dealt with the very issue of selective funding of interest groups. It throws some interesting light on the Court Challenges Program.

The Native Women’s Association of Canada argued that the government had unfairly denied it funding and a seat at the table in the so-called Canada round of constitutional consultations that led up to the Charlottetown accord. Four native groups did receive

direct funding and a seat at the table but NWAC was not one of them. The group argued that its freedom of expression had been violated as well as its equality rights under the charter.

There were some interesting ideas in terms of the judges’ reasons for their decisions. Some interesting ideas emerge which are helpful to us in our consideration of the motion before us today.

The court ruled that a government is free to choose its advisers as long as it does not base its choices on discriminatory grounds. Writing for the majority, Justice Sopinka said that the government must be free to consult or not consult whomever it pleases. There is nothing illegal about a government funding some groups and listening carefully to them while totally ignoring others. So far so good.

Let us be careful to realize that Judge Sopinka’s words about the acceptability of bias toward different interest groups applies to governments but not to the judiciary. It would be completely unacceptable for judges to want to hear only one side of an argument and to completely ignore and not even hear arguments from the other side. If they did so the public would lose confidence in the courts pretty quickly.

That is why the Court Challenges Program is such an absurd, offensive and unjust program. It may sometimes be acceptable for the government to listen to arguments on only one side of an issue but the government cannot and should not spend money in the hope that the judiciary will be subjected to one-sided argumentation.

The government can choose its own advisers but it must not choose the judiciary’s advisers. However that is the effect of the Court Challenges Program. By funding this biased organization, the government is meddling in the affairs of the judiciary. It is attempting to determine which interest groups will be able to press their case in the courts.

There is another thing which we learn from this supreme court case. The court ruled that the government’s decision to fund the four aboriginal groups but not NWAC, it was not based on discriminatory grounds. The decision was based on a procedural preference and not a gender preference. The NWAC argued that the four groups were pushing a male dominated view of aboriginal self-government but the evidence did not support this. It showed that the four funded groups adequately represented both men and women in native communities and that there were no barriers to NWAC’s working within those four groups and thus having a voice.

Not only were these groups open to working with NWAC but two of them gave \$260,000 of their government funding to NWAC precisely to assist the group in presenting its views. It is instructive that the courts clearly assumed that NWAC’s equality rights would have been violated had the evidence shown that those four groups

*Private Members' Business*

were biased against women and did not represent the views of native women.

It is clear from Judge Sopinka's ruling that the decision would have been different had the evidence shown that the four groups hand picked by the government to represent native Canadians were hindering NWAC's participation in the aboriginal consultation. If we apply Justice Sopinka's reasoning to the Court Challenges Program, the program comes up short.

First, the positions advanced by the Court Challenges Program are not, and I underline are not, representative of the views of the interest groups that have been denied funding. Second, all the evidence shows that the Court Challenges Program is indeed biased against the views of many of the non-funded groups. They do not give out dollars to those groups with whom they differ. Third, unlike the four aboriginal groups that opened their doors to make room for the NWAC to participate in the constitutional process, the Court Challenges Program has no interest in working with groups it regards as ideologically suspect. Fourth, unlike the four aboriginal groups which redirected \$260,000 of their funding to the NWAC, the Court Challenges Program has not directed any money to groups whose views it does not share.

• (1730)

For all these reasons I brought this initiative forward. Let me read it into the record again:

That, in the opinion of this House, the government should withdraw all funding from the federal Court Challenges Program.

I seek unanimous consent of the House to have the motion before us deemed adopted and passed.

**The Deputy Speaker:** The question of whether there will be unanimous consent for adoption and passage of the motion is not up for decision since the motion is not votable. Is the hon. member asking that the matter be made votable?

**Mr. Maurice Vellacott:** Adopted and passed.

**The Deputy Speaker:** Is there unanimous consent to adopt and pass this motion?

**Some hon. members:** No.

**Mr. Chris Axworthy (Saskatoon—Rosetown—Biggar, NDP):** Mr. Speaker, I am pleased to stand in the House and defend the Court Challenges Program, anything which assists in putting meat on the bones of the charter.

We know that a right in law is not much use to somebody who cannot afford it or does not have the means by which to enforce it. To hear members of parliament suggest that having a right and

having the inability to enforce it is nothing other than a taking away justice for those people is surprising.

We have a modest program which is available only to those who are disadvantaged in our society who are contending that their charter rights are not being respected to historically disadvantaged groups and those who have over time suffered most at the hands of the majority. One would have thought that members of parliament would be here to protect those very people and to do what they could to ensure their rights are protected and enhanced.

The program is a modest one. It provides modest support to those who have a case to make. The decision whether to support a program does not, as the member for Wanuskewin suggested, mean that the Court Challenges Program is doing the job of the court or this House. The Court Challenges Program and the experts who are there to dispense these relatively modest amounts are of the view that the case is one which is in the public interests to debate and one in which the person bringing it forward in the public interest is in need of some support in order to do that.

The program is unique and fundamentally an important one in the sense that it provides the opportunity to generate some substantive equality in Canada where that is presently not in place. It is limited in funds and it is limited to challenges to federal laws, policies and practices.

I ask those who would want to throw this program away do they not see some benefit in that program. Is their desire to throw that program away driven by ideology and not by common sense? I cannot believe that the member who wants to get rid of the Court Challenges Program would not be in support of the Court Challenges Response in assisting, for example, the Eldridge case, a deaf woman to assert her right to sign language interpretation when she is communicating with physicians in her quest for health care.

Is there something wrong with that? Is there something wrong with ensuring that a woman who is deaf and who can only communicate through sign language can assert her right to be accommodated so that she can be treated as everyone else? I cannot believe that many in Canada would oppose assisting a woman in that situation.

Neither can I imagine that there would be many in Canada who would oppose the support to persons of colour who work for CIDA and who are asserting that there has been systemic racism in the employment practices of that department. It is not whether it is true. Surely we would want to support those who assert that it is true and who are affected by a practice which we would all condemn. Are there many in this country who would say that we should not as a society support someone in that quest to eliminate racism in a federal government department? Those who are saying we should get rid of this program would I suppose say that is not a

very important question, racism in employment practices in government departments. I contend that most Canadians would disagree with that.

• (1735)

What about the case of an Indian woman who is being denied the right to participate in band elections? We hear a lot from the Reform Party about the need for accountability in Indian affairs. Here is an opportunity to support someone who is trying to ensure that there indeed is greater participation, greater democracy in Indian band elections. Would there be many who would legitimately complain about that?

What about the case of Tracey Smith, an aboriginal woman with children in both the United States and Canada? She is challenging immigration policies which prevent her from freely crossing the border to be with her children. We hear much from the Reform Party about families. Why would we not assist this mother to clarify this plainly unfair situation? Why would we not assist her so that she can be with her children, her family? I find it odd that those who argue so strenuously that they speak for families would not assist a mother to be with her children.

I am sure that few would disagree with the Court Challenges Program in its assistance to disabled persons. We know for example that immigrant status is generally denied to persons with physical disabilities. We must all have experienced the case of members of a family wanting to immigrate to Canada and finding they are faced with a choice of leaving their disabled child in their country of origin or in another place and coming to Canada with the rest of their family or not coming at all.

We should support those who try to resolve those kinds of disputes, the kind of thing the Court Challenges Program looks to assist a person with.

We have also experienced significant difficulties on behalf of our constituents with disability pensions. I am sure we have all seen the unfairness of that system. Why would we then not support the Court Challenges Program when it assists a disabled person to challenge the eligibility requirements for disability benefits which have adversely affected them?

It seems this program has provided a useful service to Canadians. It has enabled us to ensure that rights contained in the charter of rights and freedoms mean something to those who otherwise would not have the means to enforce them.

There are many cases in which the Court Challenges Program has provided Canada and our society and our community with significant benefits. Take the case of Mark Benner. He was born of a Canadian mother and an American father in the United States. Children born abroad of Canadian fathers do not have to apply for

citizenship. Canadians born overseas of Canadian mothers do, which is a plain discrimination.

Why would anybody think it would be undesirable to assist Mark Benner in clarifying and changing this situation? Is there something justifiable about that discrimination? I think not. Would it not be useful then for us as a community and a society together to provide some support for that case?

The case which seems to have raised the member for Wanuskewin's ire most of all is that which is being brought and supported by the Court Challenges Program by Dr. Ailsa Warkinson from Saskatoon regarding section 43 of the Criminal Code. That provision provides a defence to a charge of assault against a child victim, that is child abuse, to a parent or a teacher who uses reasonable force for the purposes of correction.

There are a number of cases identified by Dr. Warkinson in which that argument, that defence, has been used to gain acquittal even in serious assault cases against children.

• (1740)

I cannot fathom any reason why anybody would want to be critical, oppose or stop either Dr. Warkinson or the Court Challenges Program in trying to do something about a very serious problem and, if we are really concerned about children, something we should be very seriously concerned about.

It is disturbing to see an obsession with opposition to anything governments do overriding common sense and overriding something that has been useful to many individual Canadians and to us as a society.

**Ms. Paddy Torsney (Burlington, Lib.):** Mr. Speaker, I am pleased to rise on this motion today to speak against it. The issue we are debating is of great importance to Canada. It touches the heart of what defines our country. It deals with the core attributes of modern democratic societies. It focuses on the ideal of equality before the law which Canada pursues actively and for which it is recognized internationally.

I think it is ironic that today of all days we would be debating this motion when there is a delegation of members of parliament from South Africa touring today. That country has modelled its own program after the Canadian program.

The issue is the Court Challenges Program, which the opposition would like to kill. This program is a symbol of the Canadian commitment to democracy. It is also a tangible demonstration of our progressive Canadian identity.

We on this side of the House, and I gather members over there as well, are proud to have created this program and to have reinstated it in 1994 after a previous government discontinued it.

*Private Members' Business*

This government firmly believes that in a free and democratic society fundamental rights have to be protected and interpreted by the courts in a manner that reflects contemporary society.

When the Liberals reinstated the Court Challenges Program at a time of severe fiscal restraint, we made a deliberate choice at that time because the government is committed to and believes in a Canada where fundamental rights are respected and furthered.

In April of this year we signed a new contribution agreement to secure additional annual funding of \$2.75 million for this program until the year 2003. The government stands by that commitment and is therefore not supportive of the motion we are debating today.

The Court Challenges Program was first established in 1978 to assist court challenges in relation to language minority rights. In 1982 the Canadian Charter of Rights and Freedoms came into force, entrenching basic freedoms and democratic, political, legal equality, language and aboriginal rights, and the fundamental law of the land. That same year the mandate of the program was broadened to include language rights guaranteed under the charter.

In 1985 the government expanded the program further to include funding for equality rights cases arising under section 15 of the charter. The program has played a significant role in bringing before the courts those cases which have helped to define and advance language and equality rights guaranteed in the Constitution. It has already led to a number of key decisions and its usefulness has already been very well established.

Examples in the area of equality rights include the Andrews case on the overall definition of the concept of equality, the Swain case on the rights of mentally disabled people, the Tétreault-Gadoury case on the rights of persons over the age of 65, the Canadian newspaper case involving the provisions in the Criminal Code which protect the confidentiality of sexual assault victims, and the Butler case concerning the constitutional validity of the Criminal Code pornography provisions.

In the area of language rights there were the Forest, Société des Acadiens du Nouveau-Brunswick and Mercure cases concerning legal bilingualism, the reference re Manitoba in 1985 and 1992 and the Sinclair case concerning legislative bilingualism, the Ford judgment on freedom of expression and the right to use languages other than French on public signs in Quebec, and the Mahé case on the education rights provided in section 23 of the charter.

The Court Challenges Program was designed to provide access to the courts for groups and individuals who would not otherwise be able to challenge government policies and practices related to constitutional and charter rights.

• (1745 )

It provides a means for enforcing and clarifying the law. Since 1985 the program has received over 1,000 applications for funding. The program has funded several hundred challenges and a number of them made their way to the Supreme Court of Canada where judgments were rendered favourable to the group or individual funded in almost half the cases.

The program had some 350 language rights and equality case files before it when it produced its most recent annual report in March 1997. Clearly there is a need to pursue the program and to develop further charter jurisprudence in the areas of language and equality rights.

Canadians will be pleased to know that third party evaluations have confirmed that the program is well administered by an arm's length, non-profit agency with representatives from the private bar, non-governmental organizations and academics. It has clear rules and procedures for providing funding.

The program provides assistance only for test cases of national significance involving federal and provincial language rights protected by the Constitution of Canada as well as challenges to federal legislation, policies and practice based on section 2 of the charter dealing with fundamental freedoms and sections 15, 27 and 28 dealing with equality and gender equality.

Funding proposals are reviewed by two independent panels: the equality rights panel and the language rights panel. Members of the panel are chosen by independent selection committees after consultation with over 300 community groups.

Members of the selection committees and panels volunteer hundreds of hours of work to pursue the clarification of constitutional rights all of us have. They play an important role in building a free and democratic society in Canada. The government takes this opportunity to thank them for their work and dedication on behalf of all Canadians.

As reflected in its decision of 1994 to reinstate the Court Challenges Program the government is committed to advancing constitutionally based equality and language rights. Allowing a variety of voices to be heard on these rights is essential to maintain the social, economic and cultural vitality of Canada that has distinguished our country internationally and that all Canadians can be proud of.

The program plays a pivotal role in ensuring the ongoing adjustment of the interpretation of the Canadian Charter of Rights and Freedoms in protecting the rights of all Canadians. With the support of Canadians the government will continue to support the Court Challenges Program in the years to come. All Canadians and all citizens of the world can be proud of this accomplishment.



*Private Members' Business*

[Translation]

**Mr. Richard Marceau (Charlesbourg, BQ):** Mr. Speaker, I am pleased to speak to the motion introduced by my Reform Party colleague. This motion reads as follows:

That, in the opinion of this House, the government should withdraw all funding from the Federal Court Challenges Program.

I would like to tell the House immediately that the Bloc Québécois is strongly opposed to the member's motion, having given it lengthy and honest consideration.

The Court Challenges Program was created to fund legal cases having to do with the defence of equality and linguistic rights. In moving such a motion, it is evident that my Reform Party colleague is unaware of the importance of preserving these rights in a society such as ours.

Section 15 of the Charter protects the right of every citizen not to be subjected to discrimination. Is there any right more important than that of equal recognition for every individual?

A society cannot claim to be free and democratic if it does not adequately protect the right of its citizens to be treated without discrimination. With this in mind, we must make the necessary tools available so that those whose rights have been trampled can demand appropriate redress.

Some members are apparently under the impression that it is easy to take a case of discrimination before the courts. It is important to know that victims of discrimination think twice before launching into a long and costly legal proceeding.

The grounds for appeal against unjustified discrimination are not always easily determined. The line between what is considered discriminatory and what is considered a justified distinction is sometimes a very fine one.

It is therefore essential that these people be able to count on something like the Court Challenges Program to help them obtain justice.

• (1750)

The program provides financial assistance for cases appealing legislation that may deny rights to equality. It also, and this is very important, helps people express their linguistic rights.

Once again, I would point out the implication of the recognition of language rights. Section 133 of the Constitution of 1867 provides for the optional and mandatory use of the French and English languages. Furthermore, the charter of rights and freedoms contains certain provisions on protecting the use of the official languages.

Some will claim, and rightly so, moreover, that language rights are not sufficiently promoted. French language services are certainly not provided all across Canada. Language rights are as important in a society such as ours as equal rights. It is through language that people express themselves and make themselves understood. Language provides expression to our emotions, our dissent, our approval and our feelings.

Democracy cannot function properly if the public cannot make its voice heard. Justice will not be served if those who come before the courts cannot make themselves understood there in their own language.

The reason the court challenges program supports people wishing to protect their language rights is to preserve the delicate balance between the official languages. The program provides funding for preparing court cases and for pre-trial research.

The court challenges program is essential to ensure that everyone has access to justice. That said, what explanation can there be for the hon. member's proposal that the program funding be terminated? This is incomprehensible. One would have to be very short-sighted and narrow-minded to propose such a thing.

In proposing such a motion, the hon. member will certainly attempt to find support in the policies of the former Conservative government, which had decided to put an end to the program, to kill it. It is important to keep in mind that the Minister of Justice of the day, Kim Campbell, the colleague of future Quebec Liberal Party leader Jean Charest, had used the difficult economic climate of 1992 as justification for termination of the program's funding.

At a time when the federal budget surplus could reach several billion dollars, I have a great deal of difficulty understanding the hon. member's motion. I am not, moreover, alone in wondering what lies behind the Reform member's proposal. I would invite him to justify it to the members of the Fédération des francophones de Saskatchewan, who are this very day here in Ottawa calling for their province to become bilingual.

In a release issued today, the president of the federation said, and I quote "The ethnocide of the French-speaking minority has always been perpetuated by provincial governments in areas such as education, health and social services, while the federal government looked the other way". In such a context, it is completely inconceivable that a member would dare to move the withdrawal of funding from this program.

In addition, in its June 1992 report, the Standing Committee on Human Rights and the Status of Disabled Persons—the Bloc was not there at the time—concluded that the program played an essential role by giving individuals access to the courts. The Court Challenges Program has become indispensable to the development of equality and linguistic rights case law.

*Private Members' Business*

The Bloc Québécois feels not only that funding for the Court Challenges Program must be maintained, but that improvement of the program would be justified. I urge my colleagues opposite to give this some thought.

The inequality that has existed with respect to historically disadvantaged groups is justification for preserving such a program. We must ensure adequate access to the courts and make it possible for rulings having to do with the violation of equality and linguistic rights in our society to be enforced.

[English]

**Mr. Peter MacKay (Pictou—Antigonish—Guysborough, PC):** Mr. Speaker, I am pleased to speak to Reform Motion No. 327. The motion, as has been stated, already calls for the government to withdraw all funding for the federal Court Challenges Program, the program presently administered out of Winnipeg.

It was mentioned by the member proposing the motion that the money currently available is \$2.5 million. As described by my colleague in the New Democratic Party, this is really a modest sum when one looks at the overall money spent in the present court system relative to what the government spends on a single case. For example, the Airbus case would probably double that total budget.

• (1755)

The federal Court Challenges Program was established in 1968, as indicated by the Department of the Secretary of State, to fund challenges to federal and provincial language rights protected under the Constitution of 1867. The overall objective clearly was to clarify rights and freedoms as protected by the charter.

In 1982 the program was expanded to include language rights under the Canadian Charter of Rights and Freedoms. In 1985 the administration of the program was vested in the Canadian Council on Societal Development.

In 1990 it was moved to the human rights research and education centre at the University of Ottawa. In 1992 admittedly the Progressive Conservative government cancelled the Court Challenges Program based on the need at that time to cut spending and the deficit. It was subsequently reinstated, as has been indicated in the Chamber, by the Liberal government in 1994.

However there is an historical fact that needs to be on the record, and that is that the Campbell government was prepared and had a platform that called for a reinstatement of a program similar to one that was in place. I will speak to that later in my remarks. Were it not for a slight electoral shift that occurred in 1993, which some might call an earthquake or even the earth opening up and swallowing us whole, the program would have been in place in a somewhat revised form.

Since then and what we have now is a fiscal situation where the deficit has been harnessed much through the work of previous administrations and those policies that were carried on by the current government. This brings into question the basis of the motion questioning the funding and the motivation behind the particular program.

Parliamentarians have to stop and question the legitimacy and the necessity of a program such as this one. The federal Court Challenges Program has been of real benefit in several important legal decisions in the country. The program allows Canadians to clarify the Canadian charter rights that exist. However it was not intended to give a perpetual fund for lobby groups, particularly lobby groups that may have some spurious intent. The suggestion that we should cancel the program outright is the usual solution we sometimes hear in the Chamber where we throw the baby out with the bath water.

The suggestion I will be putting forward is that the program is necessary, but there are perhaps some improvements that could be made. There has been mention of the fact that the program is susceptible to manipulation and perhaps abuse if that money is made too readily available. This can be addressed by having assurances in place that a strict criterion must be met, a criterion with respect to the cause and the need. That currently exists. As in all situations involving boards and administrators, what we have to see is a more diligent approach and perhaps a more proactive effort made to ensure that the criterion is met.

Obviously what the country does not need and what our legal system does not need is more spurious challenges to the court. We have seen in recent years Canada becoming an overlitigious society. We see the courts called upon daily to rule upon issues that seem to me, and I am sure to some Canadians, to be issues of common sense that could be applied and settled far from the chambers of the courts.

That being said, the Progressive Conservative Party and I believe there is legitimate need for a program such as this one. The government should remain committed to equality rights for all Canadians and should therefore continue to support a program that will flesh out or allow a forum for individuals who feel oppressed to access resources they might need to pursue those rights in the courts. I think there can be no other or no more important purpose for a fund such as this one.

• (1800)

Thousands of charter rulings in the courts have been handed down in recent years. These decisions are critical to the operation of our justice system and to the operation of Canadian society generally. Morals are sometimes shaped there. Ideological ideas are given a forum for discussion. Legal issues are explored in a more detailed fashion.

*Private Members' Business*

We have become a more rights oriented society as a result of the charter. However the charter of rights and freedoms has also become an agent of change in this country. Pursuing cases through the courts is a critical and crucial part of this avenue for change.

The court process of course can be very long and arduous. It is a process that at times is beyond the reach and beyond the economic capacity of some individuals who wish to challenge rights or infringements of their rights.

Calling for a blanket removal of this fund I suggest is not the answer. It was for these very reasons that the original program was put in place, to establish test cases which deal with certain provisions of the charter. It does not mean that this program should be abused or that charter rights should be brought forward at every turn of the road.

A further suggestion one might make with respect to the improvement of the federal Court Challenges Program would be that one could perhaps look at reducing or in some ways adding to the funding by the invitation of other groups in the community being permitted to contribute to the fund itself.

I would suggest that provincial bar societies might be canvassed. Other civil rights groups that feel strongly that this fund should remain in place should be invited to contribute. I suggest that this would in fact enhance the present program. It would also recognize the importance of ensuring that this mechanism which is available for bringing forward significant test cases to clarify the charter law would continue.

The Conservative Party of Canada has always embraced this concept. We would put forward the suggestion that we could improve and build upon the present program. That is not to say there should be more money necessarily poured into it by government, but it should be open perhaps to other sources for funding. Adapting the present program is a suggestion we put forward.

The new charter law program might also differ from the actual federal Court Challenges Program in that it would be used to test federal laws not only under equality of language provisions of the charter, but also under fundamental freedoms provisions such as those of freedom of speech, conscience, religion and others.

There does not have to be a trend toward either a left wing or a right wing movement or challenges in the court. It should certainly be open. Again I refer back to the necessity of criteria.

Tightening the requirements and the criteria would be the way to combat some of the suggestions put forward by the mover of the motion that have led to the abuses.

Another way or a new way of administering the program would also have the double advantage of reducing federal funds without killing this existing program. The purpose here is not to encourage

lengthy and costly court cases, but to build upon the charter law and the usefulness this program provides.

Before approving any funding for a court case, the program would have to satisfy the issue of it being a new and significant issue and one of national significance.

This brings me to the closing point I would like to make. Unfortunately there is an emergence in Canada where courts are being called upon ever more to delve into the area of policy. It is extremely important that the parliamentary process and the sanctity of parliament in making and passing laws be enhanced and always be buttressed by those who arrive in this chamber.

In closing I would just say that the courts should be satisfied that they are not the exclusive defenders of the charter. For the reasons I have set out, we cannot support this motion.

• (1805 )

**Mr. Eric Lowther (Calgary Centre, Ref.):** Mr. Speaker, I acknowledge your indication of the time and I want to make sure my colleague has the opportunity to sum up at the end of the debate.

I want to follow on the comments of the hon. member who just spoke. I found it interesting that he on the one hand calls for accountability through the democratic process and for policy to be shaped by the democratic process, yet intertwined in his talk is support for the Court Challenges Program. I found a real inconsistency when we look at what is actually going on here.

My experience prior to coming to this great House was that I worked in a business environment and had some exposure to certain business practices. One of the things that is brought to mind is the generally accepted accounting principles and practices that are norms and structures for the business environment.

Why are those principles put in place? They are there to ensure that business processes are structured in such a way that there is not even the appearance of a conflict of interest or the appearance of misuse. They protect the processes against any kind of misuse. The problem with the Court Challenges Program is it does not have that kind of protection for the taxpayer.

One of the new terms we have heard coined in Canada lately is the term of judicial activism. I see that as the will of special interest groups using unelected judges to override the parliamentary or democratic process which if successful imposes the will of the minority on the majority. This is of particular concern to us with this program.

Since the charter of rights, and the hon. member who just spoke made mention of this, many social policy debates have shifted from the political arena and from the democratic process into the courts. My concern and the concern of many of the members of my party

*Private Members' Business*

is that special interest groups are imposing their particular positions on the will of the majority.

Policy matters should properly be handled not by taxpayer funded special interest groups presenting their cases before unelected judges but by common support and elected representatives debating and deciding these issues in parliament and legislatures. This is the foundation of our country, the democratic process, yet we are seeing it overridden by programs like the Court Challenges Program.

I quote an example. The *Lawyers Weekly*, in a 1992 issue stated that 75% of the Women's Legal and Education Fund, LEAF for short, which is known as a feminist activist group, had interventions before the Supreme Court of Canada which were funded by the Court Challenges Program. Many of their interventions were funded by this program. The group LEAF intervened on a number of cases. Borowski, Daigle, Lemay and Sullivan were all cases dealing with the laws around abortion. In these same cases another group, REAL Women of Canada, had also been granted intervenor status by the Supreme Court of Canada but they were refused funding by the Court Challenges Program.

Regardless of where one sits on these particular cases or on this issue, there is a fairness issue here that is obvious. Even if one is going to endorse this program one would think there would be some component of fairness. But when one side of the argument is funded and not the other and it is done in such a heavily weighted fashion, there are clearly some significant problems with the process.

These are the kinds of examples which illustrate that certain groups with certain ideologies and certain opinions are being endorsed and funded by taxpayers. I liken it to being forced to pay someone to beat you up with a stick. That is what is happening to Canadian taxpayers thanks to this program.

I know my time is short so I will move to my concluding remarks to ensure that my colleague has time to summarize.

• (1810)

Our party's position is that we would like to ensure that the foundation which built this country, the democratic process that gives Canadians an opportunity to shape policy in the public arena but not through the court system is what is entrenched. Those are all detailed in our policy. We stand behind them and that is what members will see in the House as we represent our positions.

**The Deputy Speaker:** I regret to interrupt the hon. member but his colleague has five minutes to reply. The hon. member for Wanuskewin has five minutes, if he wishes to use it, and I should advise the House that if he speaks now he will close the debate.

**Mr. Maurice Vellacott (Wanuskewin, Ref.):** Mr. Speaker, there has been a fair bit of a thread of fallacy that has run throughout the speeches that have been made today. It is the fallacy that these cases would not be heard, that there is no way they would have their day in court if it were not for the Court Challenges Program.

I need to state for the record and for the Canadian public that is blatantly false. It is untrue. These cases have been, can be and will continue to be heard in the courts quite aside from court challenges funding. It is important for language rights and equality rights cases to be heard and they can in fact be heard without the Court Challenges Program.

There are other means by which, as they say, poor dispossessed groups that do not have the resources can achieve resource to take issues to the courts. There are wealthy individuals. There are foundations. There is legal aid as well, which is a very good suggestion because it is based on a means test. If those people have a valid case they can have it brought forward and paid for by the taxpayer in that manner.

What we have here is a major problem. The Court Challenges Program in my view is not committed to equality as clarified by judges but rather to their own predetermined understanding of equality. They already have this set idea of what is equality. Then they only allow in and shunt down the road those who meet the particular definition. As we said before legal aid is one means. There are others, as I have suggested, that could be explored as well.

The Court Challenges Program funds interest groups, not individuals. The hon member for Saskatoon—Rosetown—Biggar referred to Ailsa Warkinson, a lady out of Saskatoon, my home city, who had to link up with a group because she had not been corporally corrected and therefore was bringing her case forward on that basis. Rather it is an interest group. It is a group with a cause, with an agenda.

Also we mentioned before that there were groups. I read from one group that makes the point that "there are many court cases in which we did not intervene or initiate simply because we lacked the funds". They did not have access to the Court Challenges Program because they did not meet the definition of equality of that biased group which sits on the Court Challenges Program board. These other groups are cut off, shut out and not allowed in. In every case we have been opposed by organizations which were funded by the Court Challenges Program.

Then there is the myth of disadvantaged groups without access that have been made much of today. There are groups that have wanted and needed the funding, that do not have the resources or do not have the reserves. They have been put at a decided disadvantage because time and time again they have been turned away and not allowed any access to the Court Challenges Program.

*Adjournment Debate*

The charter recognizes certain disadvantaged groups. It is natural, the myth goes, that they should get funding to help them catch up to the rest of us. If that were the case, both sides of the argument need to be heard. Both sides need to be heard in court. That remains. We go to court presuming that one side is right. Therefore there is a necessity in a democratic system, in a proper judicial setting, for both sides to be heard.

As my colleague before me mentioned we have had this great beast of judicial activism beginning to rear its head in Canada, this judicial imperialism, the end run around democracy, usurping the supremacy of parliament. The Court Challenges Program is trying to re-engineer society and set the social policy agenda. It is doing an end run around the elected representatives of the people of Canada.

If groups with social causes want to push an agenda, if they want to push a cause célèbre, they should put a candidate forward at election time. They should get involved in the political process and push that agenda as hard as they want. That is their right. They should not attempt to do it by way of an end run around the courts, usurping the supremacy of parliament.

Obviously I object to the Court Challenges Program. I will attempt once again to seek unanimous consent of the House to have the foregoing motion before us deemed adopted and passed.

**The Deputy Speaker:** Is there unanimous consent that the motion be deemed adopted and passed?

**Some hon. members:** Agreed.

**Some hon. members:** No.

**The Deputy Speaker:** There is no unanimous consent.

• (1815)

[*Translation*]

The time provided for the consideration of Private Members' Business has now expired and this item is dropped from the Order Paper.

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## ADJOURNMENT PROCEEDINGS

[*English*]

A motion to adjourn the House under Standing Order 38 deemed to have been moved.

DEVCO

**Mrs. Michelle Dockrill (Bras d'Or, NDP):** Mr. Speaker, after rising in the House on March 16 to ask the government about the

future plans for Devco I was attacked by the Minister of Natural Resources who, when asked by a fellow government member about the Liberal position on Devco, the Donkin mine and other issues of grave concern to the people of Cape Breton Island, resorted to the worst form of heckling and insult.

I was accused of not thinking of my constituents, but of trying to save the skin of the NDP. Regardless of what the hon. member thought my motives to be, it was clear that I had no need to worry about saving the skin of my party, as we are all aware of the stunning defeat suffered by the Liberal government on March 24 and of the NDP's rise to official opposition status.

Perhaps the minister and the House would also be interested to know that of the seats on Cape Breton Island that went NDP, the two with the biggest majorities are in the areas where coal mining has been the way of life for hundreds of years. Those are the people who stood on March 24 and rejected the party that has hurt them and their communities, which has refused to listen and to speak honestly.

I hope that this latest political rejection of the Liberal Party will be noted by this government and we can now start a new era in relations between this federal administration and the people of Cape Breton, an era where justified and factually supported questions are no longer dismissed as fear mongering, where questions are answered instead of questioners being attacked, and where the people of my island are treated as equals with those from any part of this great country.

I hope that this new era will begin. As the weeks pass I grow more and more concerned that the process of closing down the coal industry is continuing with increasing speed. Since I last spoke on this issue, the international coal piers have been closed, shutting Devco coal off from the export market for at least two years.

It is easy for the government to comment on Devco's inability to make a profit, but it should also be critical when the crown corporation is cutting itself off from valuable future markets. While more and more miners are being placed on indefinite layoff, the latest Devco revelation comes in a letter I received this week from the tripartite task force on fires and explosions in coal mines that expresses grave concerns over the shutdown of the coal research lab in Sydney earlier this year. The lab, which was urged to expand its activities in the report on the Westray disaster and whose necessity has been reinforced by the recent coal mine disasters across the former Soviet Union, was closed down despite objections from the industry and from the task force, which itself is a government funded body.

We have a government body questioning and condemning the actions of the government. More than that, in a copy of a letter from 1996 included with the pleas to restore funding to the research lab, the former chair of the task force talks of how he has been made aware of a government plan to shut down the lab if it cannot be privatized.

*Adjournment Debate*

The orderly shutdown of Devco continues. The government continues to hide the truth. Why is this government helping Devco to shut down its future by destroying the corporation's ability to develop new markets and new technologies? I have asked this question so many times. I hope you will indulge me one more time, Mr. Speaker. I hope that the government will take advantage of the changed political landscape and start a new relationship based on open dialogue with the people of Cape Breton.

Will the government release its real plan for the future of Devco and come clean with Cape Bretoners?

**Mr. Gerry Byrne (Parliamentary Secretary to Minister of Natural Resources, Lib.):** Mr. Speaker, I would like to thank my hon. colleague for her intervention.

This is not her first intervention on this particular issue of an allegation of a secret plan to shut down Devco. I am sure it will not be her last, for the simple reason that the hon. member has found considerable grief in being subjected to the worst form of heckling and insult by the Minister of Natural Resources in responding to the continuous litany of accusations that there is a privatization plan to terminate the operations of Devco. The minister has responded with what has been called the worst form of heckling

and insult; that being, of course, the truth. But there is no such plan to terminate the operations of Devco. The hon. member may find that heckling and insulting, but that may be because the truth may sometimes foil a good story.

The story being perpetuated by the member is not very helpful to the operations of Devco, nor is it helpful to the management or to the orderly operations of this firm which is quite capably developing an economic opportunity for the people of Cape Breton.

I am concerned with the hon. member's continual insistence that this strategy exists. The secret cabinet document that was referred to has been found not to be a secret cabinet document at all. Frankly, it does not exist. The allegation, being quite false, is not very helpful to the workers of Devco. I plead once again for the hon. member to cease and desist and to work with us to explore the truth for a change and to continue in supporting this corporation.

[*Translation*]

**The Deputy Speaker:** The motion to adjourn the House is now deemed to have been adopted. Accordingly, this House stands adjourned until tomorrow at 10 a.m., pursuant to Standing Order 81.

(The House adjourned at 6.19 p.m.)

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